

Annual report on the National Health System of Spain 2022

Executive Summary





ANNUAL REPORT ON THE NATIONAL HEALTH SYSTEM OF SPAIN, 2022

EXECUTIVE SUMMARY



Population

HEALTH STATUS



Well-being



Morbidity



Mortality

SOCIAL DETERMINANTS OF HEALTH



Socio-economic determinants

Lifestyle



HEALTH SYSTEM



Healthcare



Accesibility



Patients' experience



Pharmaceutic al benefits



Physical resources



Human Resources



Expenditure



Digital Health



POPULATION

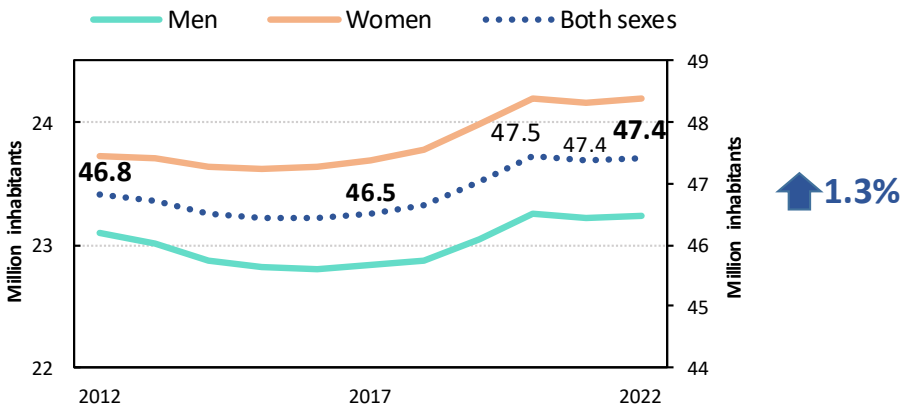
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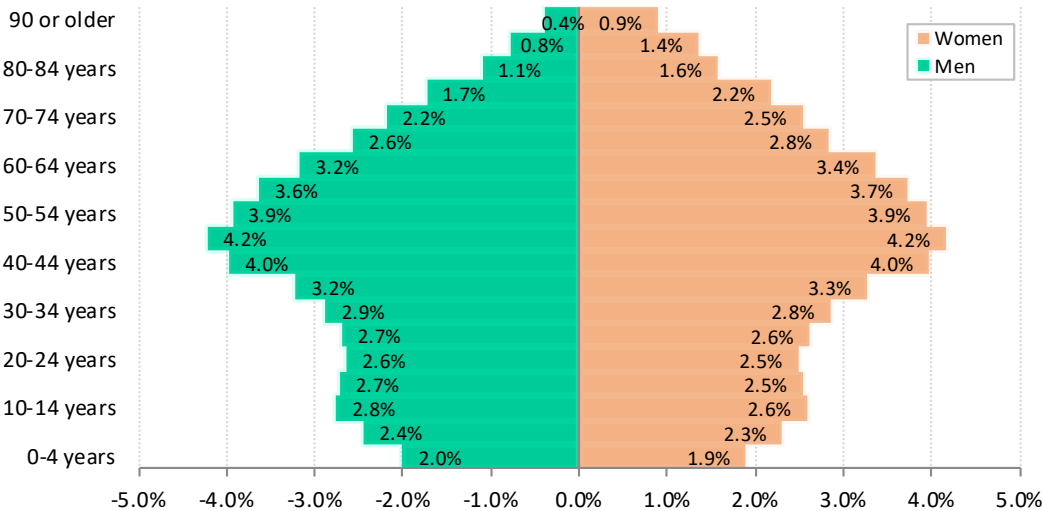
POPULATION FIGURES

47,432,893 people

Spain is the 5th country with highest population of EU-27



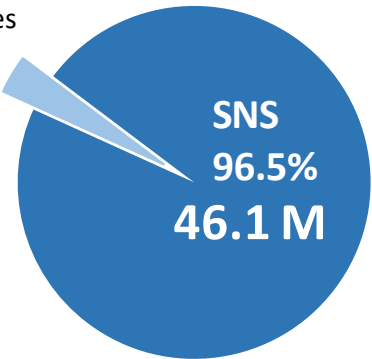
The population pyramid is clearly REGRESSIVE



POPULATION COVERED BY THE SNS

100% population with healthcare covered with public funds:
47.4 M people

Insurance Schemes receiving private healthcare
3.5%

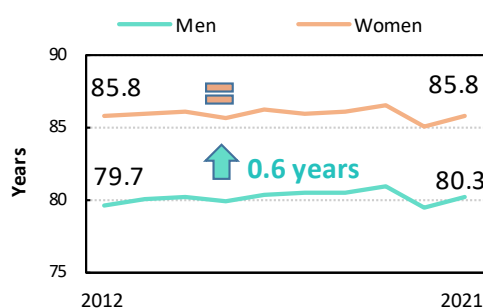


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WELL-BEING

LIFE EXPECTANCY

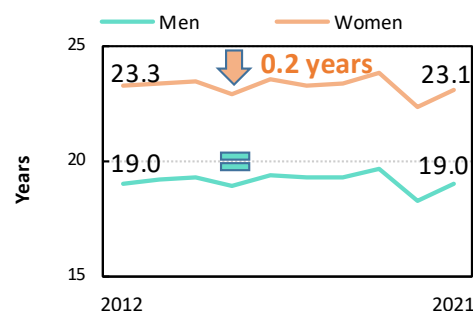
AT BIRTH



Life expectancy at birth:

WOMEN'S: 85.8 years and MEN'S: 80.3 years

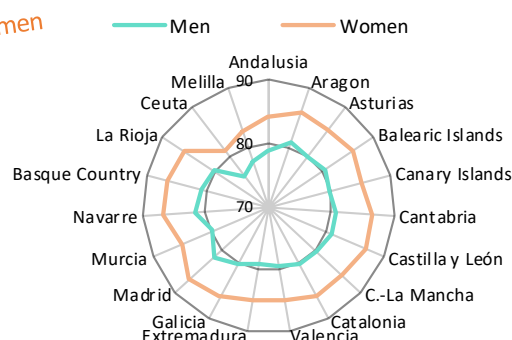
AT 65



Life expectancy at 65:

WOMEN: 23.1 years and MEN: 19.0 years

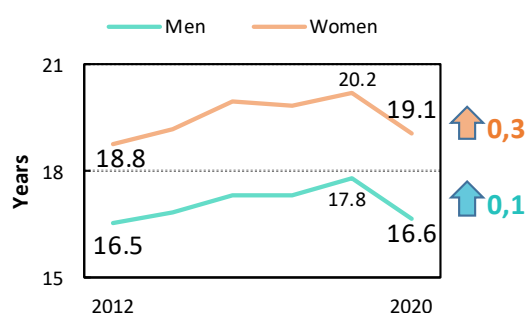
Ranking UE-28:
1st position in women
3rd in men



Ranking UE-28:
2nd position in women
3rd in men

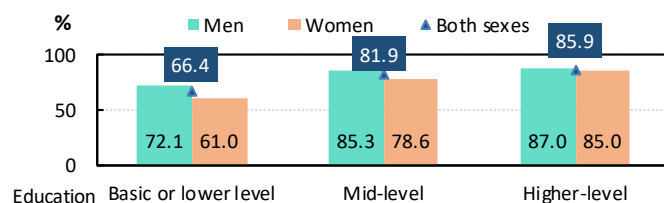
At birth, **WOMEN'S** life expectancy is 5.5 years longer than **MEN'S**

QUALITY OF LIFE



Since 2012 **HEALTHY LIFE YEARS** at 65 increased **0.5** percentage points for men and **0.3** for women.

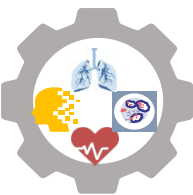
5th position in the EU-27



A **POSITIVE PERCEPTION OF HEALTH** in people aged 15 or older is **75.5%**, clearly lower among people with basic or lower-level education, especially women.

The average score for health-related **QUALITY OF LIFE IN CHILDREN** is **87.4** points in children aged between 8 and 14 years





MORBIDITY

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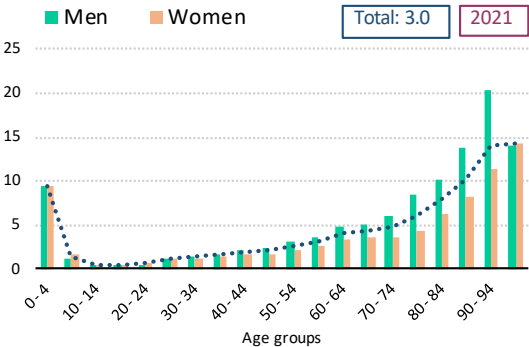
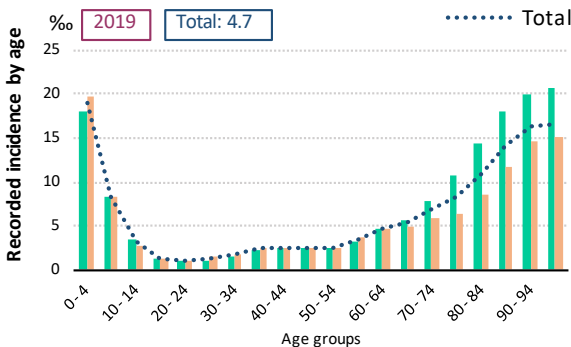


RESPIRATORY DISEASES

Pneumonia (doesn't include COVID-19 pneumonia)

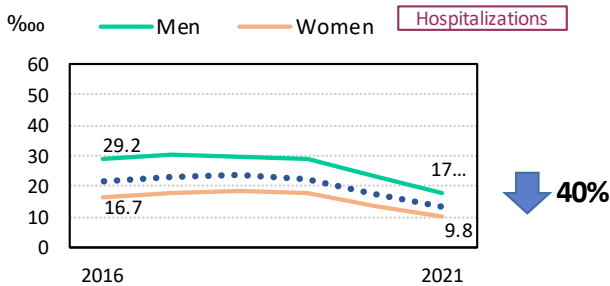
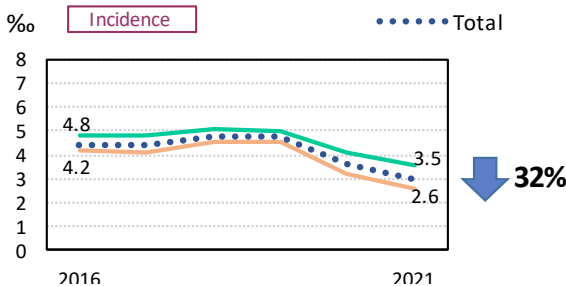
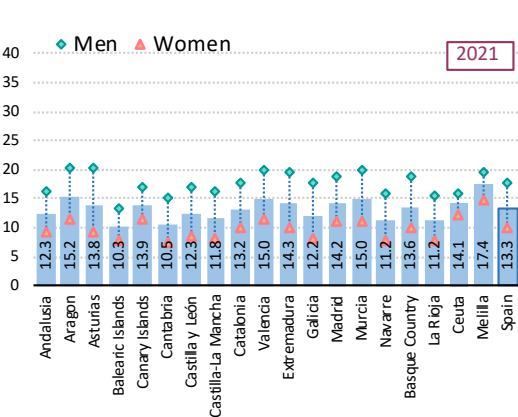
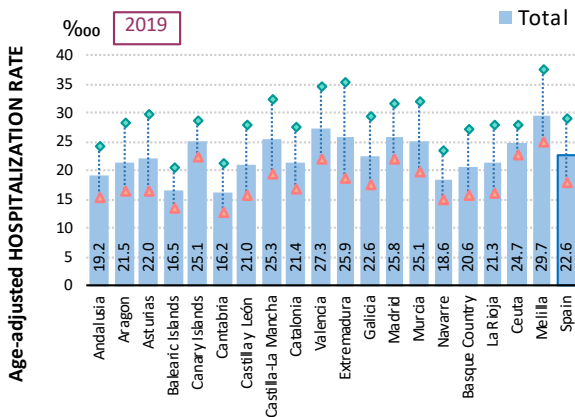
3 cases of pneumonia per 1,000 inhabitants yearly

More than 1% in those over 80 years of age



11th lowest of EU

Age-adjusted hospitalization rate: 13.3 hospitalizations per 10,000 inhabitants

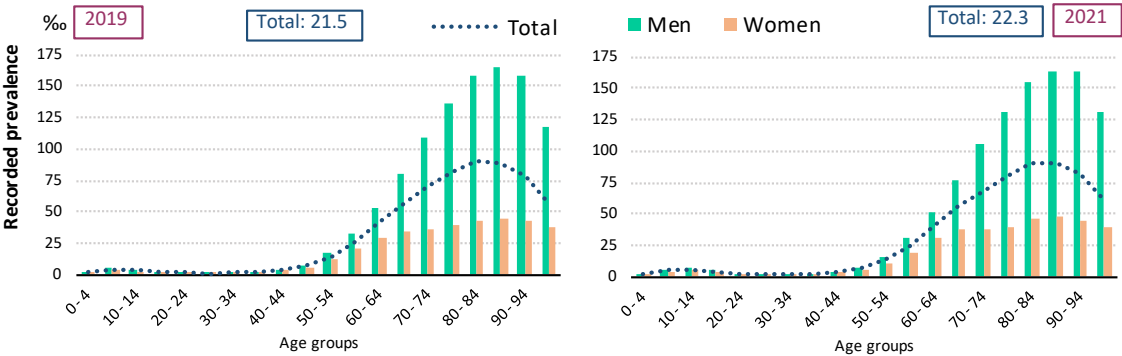


RESPIRATORY DISEASES

Chronic Obstructive Pulmonary Disease

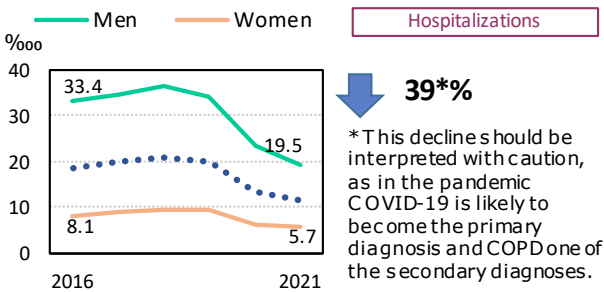
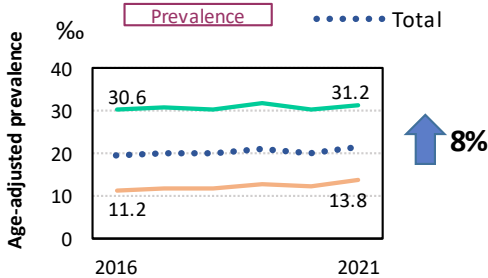
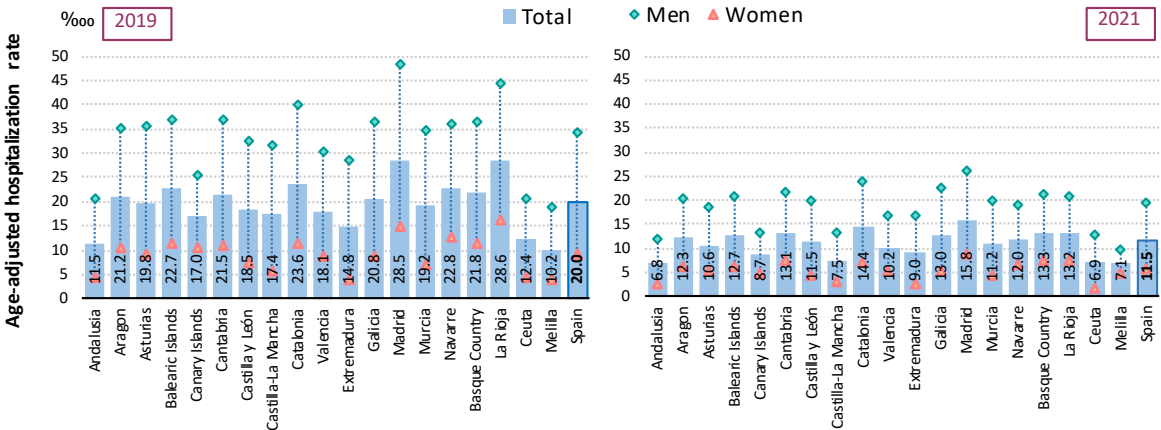
2.2% population suffer COPD

More than 10% in men aged 70 or older



8th highest in the EU

Age-adjusted Hospitalization rate: 11.5 hospitalizations por 10,000 inhabitants, 42.5% less than in 2019



39%* This decline should be interpreted with caution, as in the pandemic COVID-19 is likely to become the primary diagnosis and COPD one of the secondary diagnoses.

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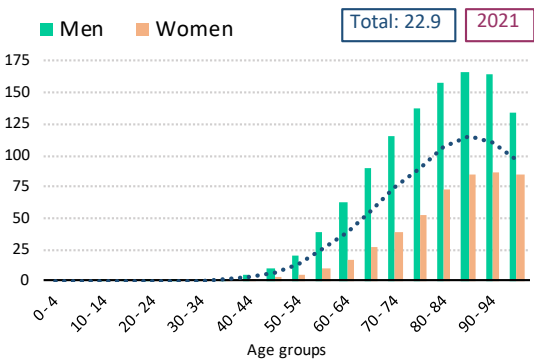
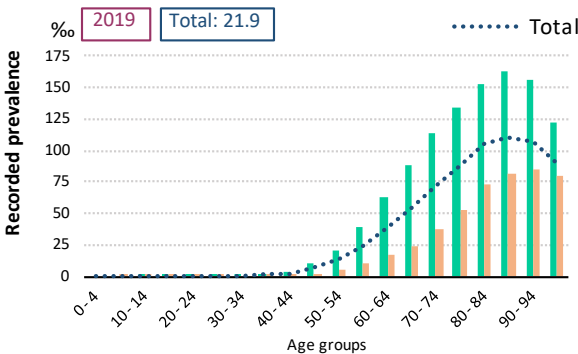


CARDIOVASCULAR DISEASES

Ischaemic heart disease

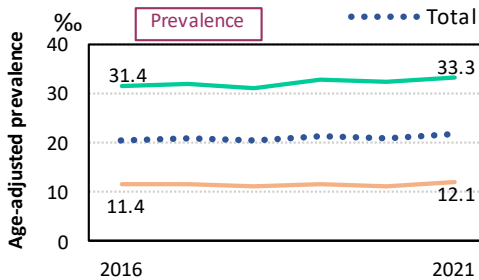
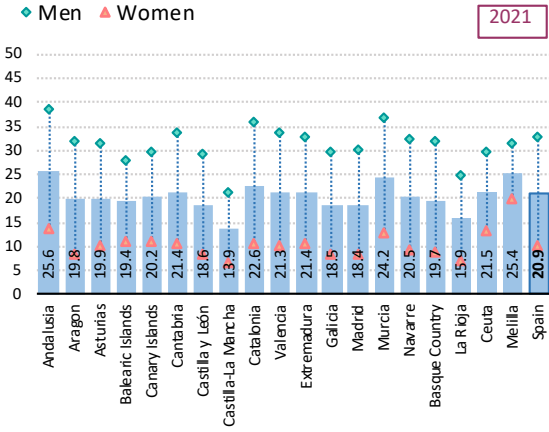
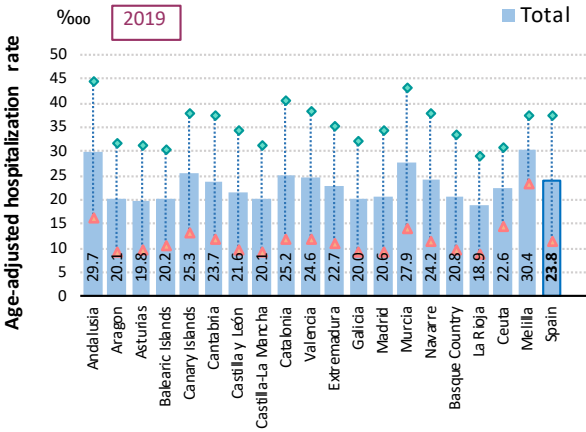
2.3% of population suffer from ischaemic heart disease: **MEN: 3%** and **WOMEN 1%**

More than **10%** in men aged 70 or older

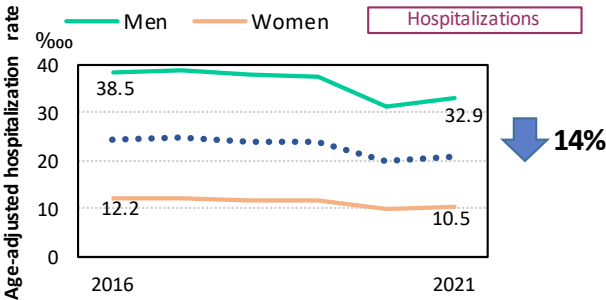


3rd lowest in the EU for acute myocardial infarction

Aged-adjusted hospitalization rate: **20.9 hospitalizations per 10,000** inhabitants, **12.2% lower** than in 2019



↑ 6%

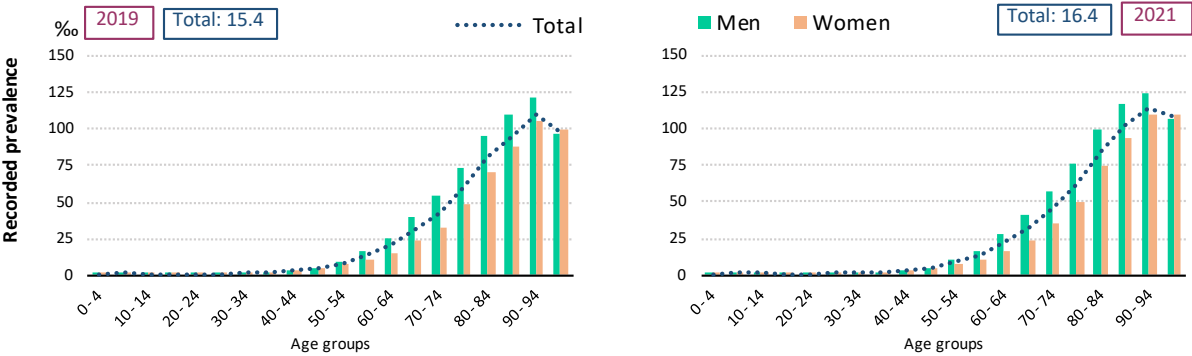


↓ 14%

CARDIOVASCULAR DISEASES

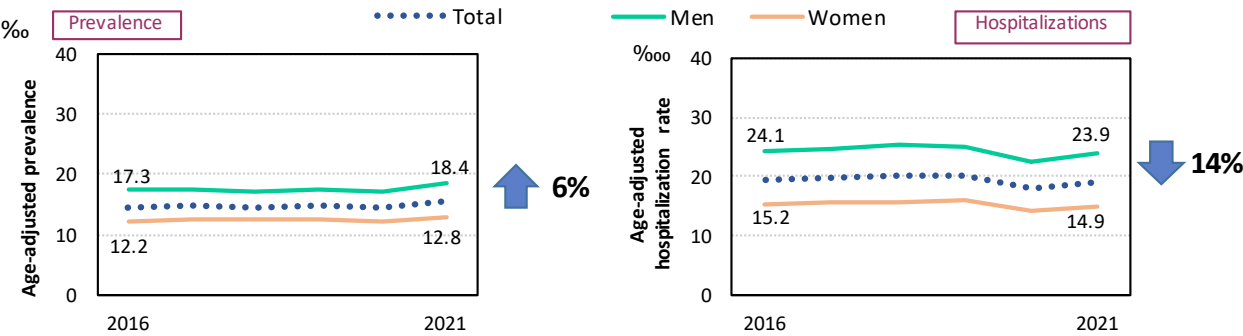
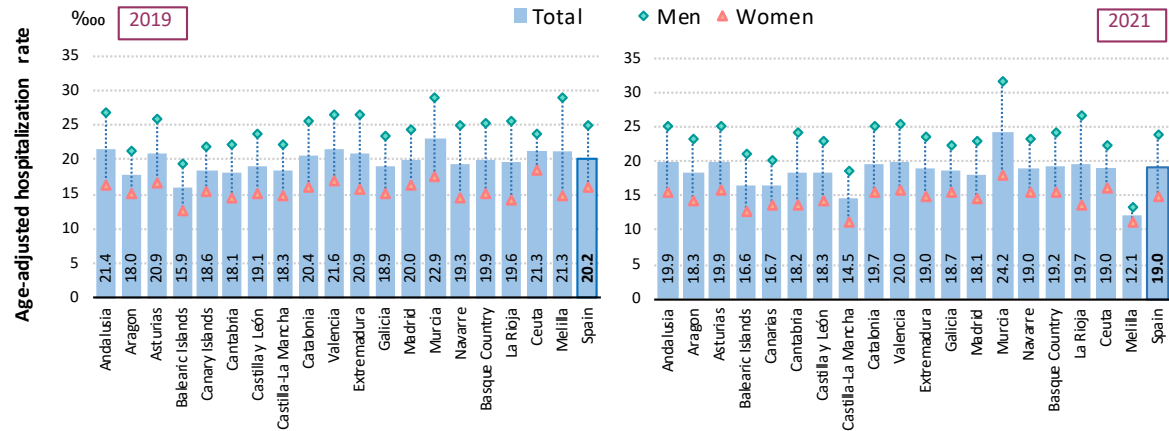
Cerebrovascular disease

1.6% of population suffer cerebrovascular disease:
3% from the age of 65
10% from the age of 80



Aged-adjusted Hospitalization rate: 19 hospitalizations per 10,000 inhabitants,
5.8% lower than in 2019

2nd lowest
in the EU

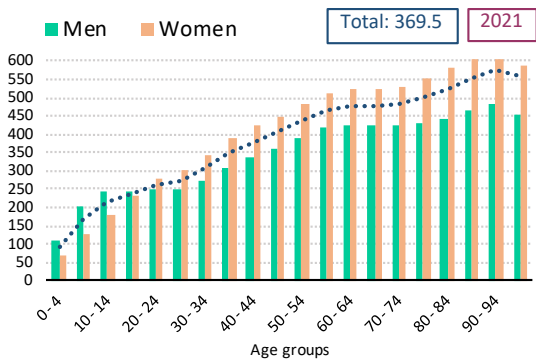
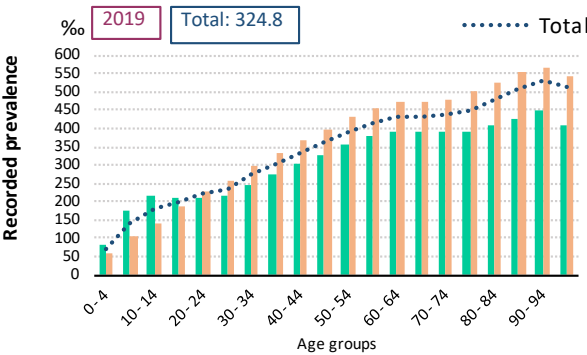




MENTAL DISORDERS

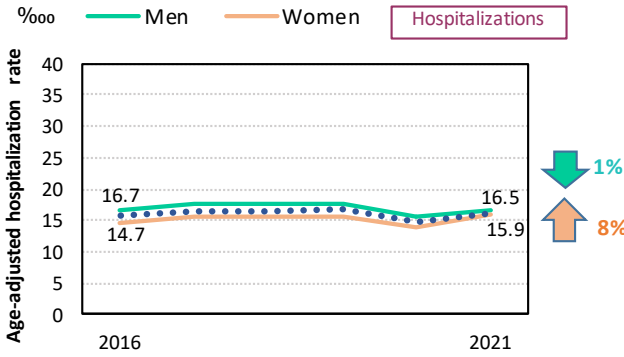
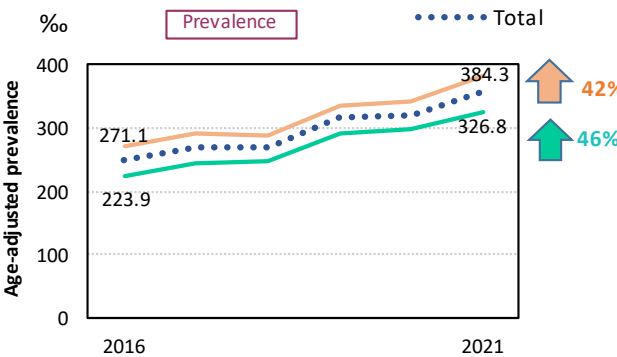
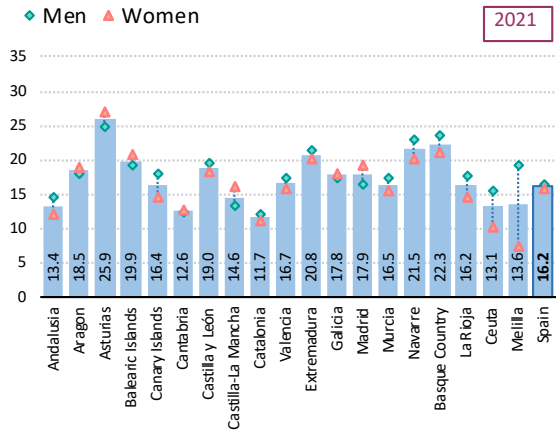
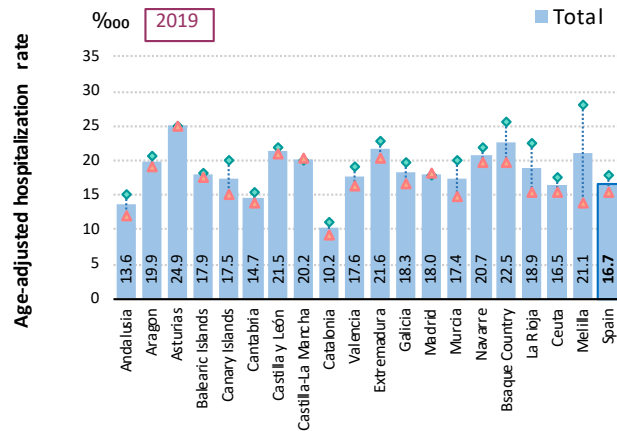
Mental disorders

37% of the population have some type of mental disorder, rising to **50%** in the **75 and older age group**



5th lowest
in the EU

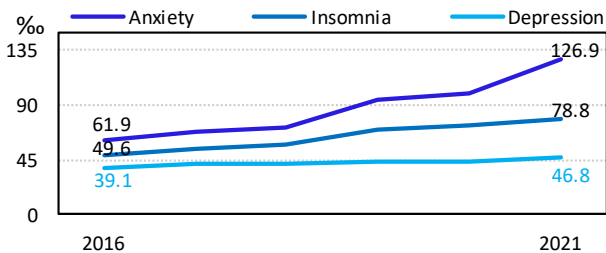
Aged-adjusted hospitalization rate: **16 hospitalizations per 10,000** inhabitants



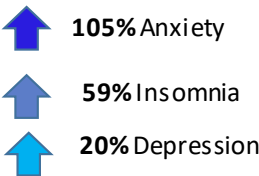
MENTAL DISORDERS

Most common mental disorders

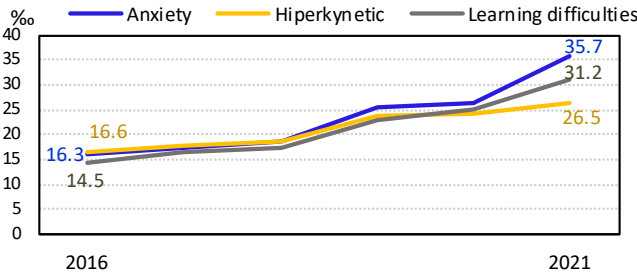
General population



Growing trend: 2016-21:

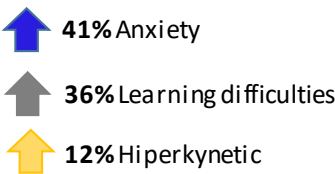


Youths under 25



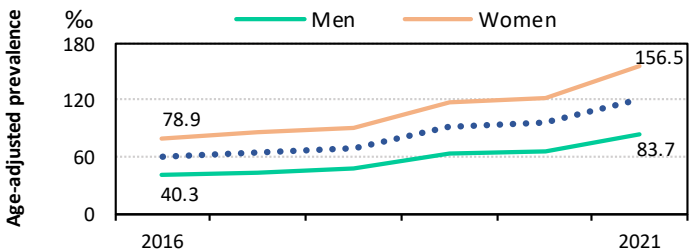
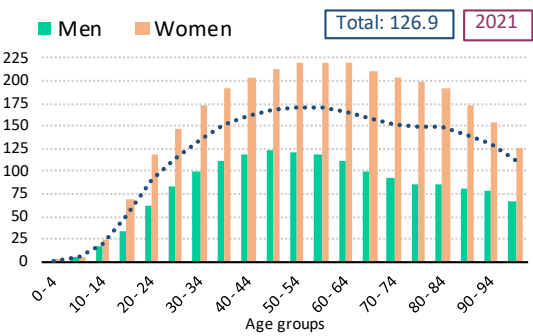
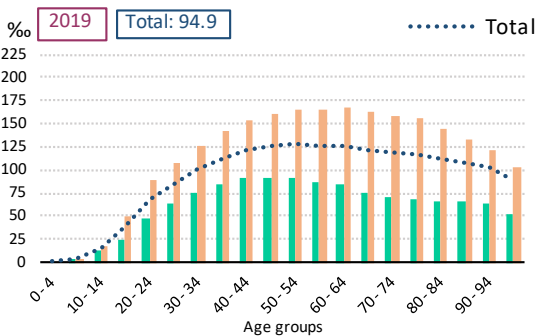
Growing trend: 2016-21

Increasing between 2019- 2021:

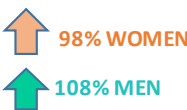


Anxiety disorders

13% de la population suffers from an anxiety disorder: **MEN: 9%** and **WOMEN 17%**



Growing trend: 2016-21:

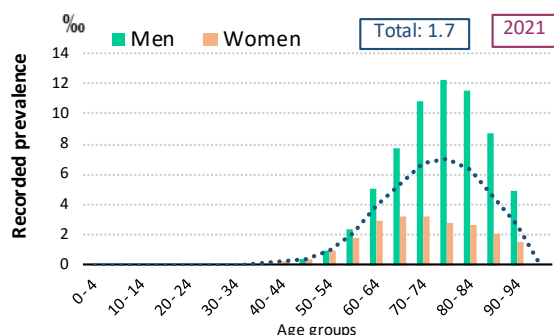


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MALIGNANT TUMOURS

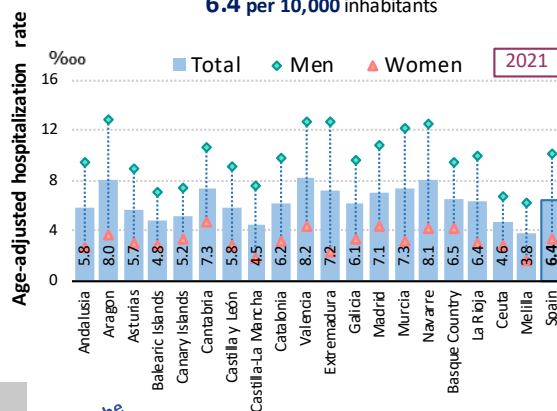
Malignant tumour of trachea, bronchi and lungs

1.7 cases per 1,000 inhabitants

6th lowest in the EU

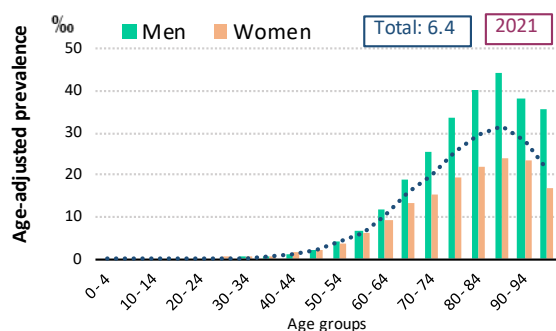
Aged-adjusted hospitalization rate:

6.4 per 10,000 inhabitants



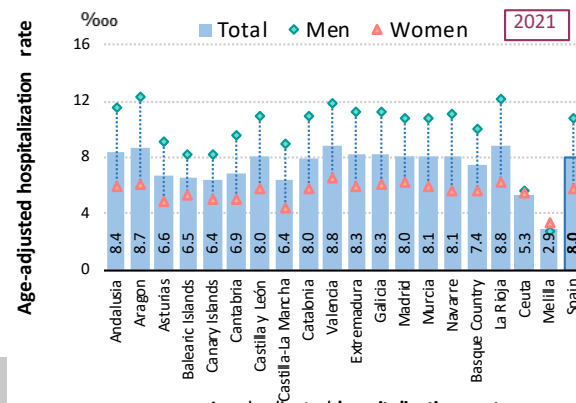
Malignant tumour of colon and rectum

6.4 cases per 1,000 inhabitants

8th lowest in the EU

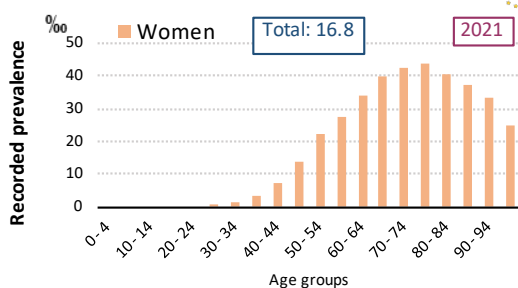
Aged-adjusted hospitalization rate:

8.0 per 10,000 inhabitants



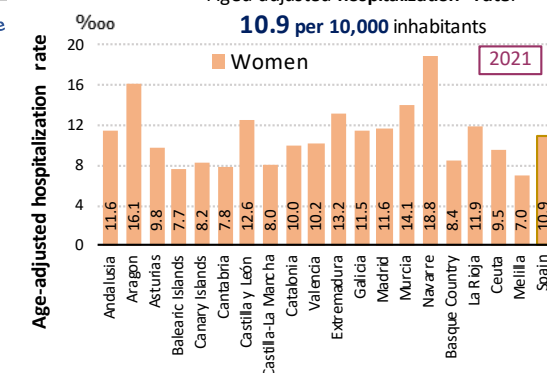
Malignant tumour of breast

16.8 cases per 1,000 inhabitants

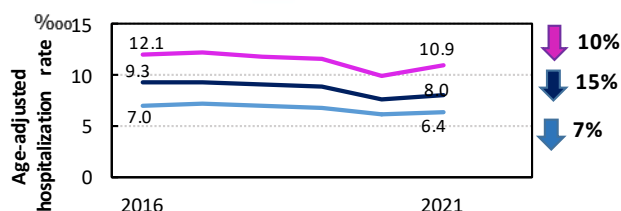
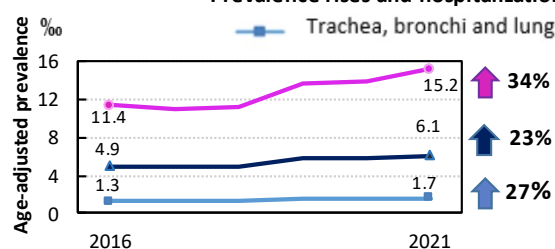
13th lowest incidence in the EU

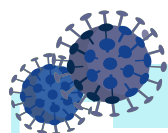
Aged-adjusted hospitalization rate:

10.9 per 10,000 inhabitants



Prevalence rises and hospitalizations fall for the three most common malignant tumours



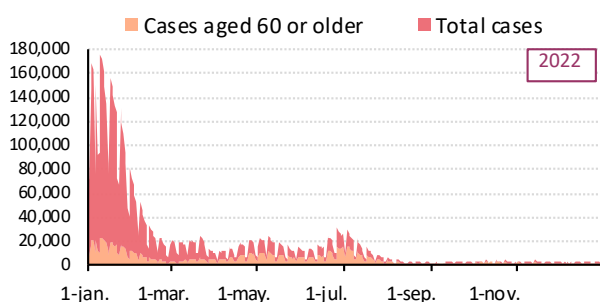


COVID-19

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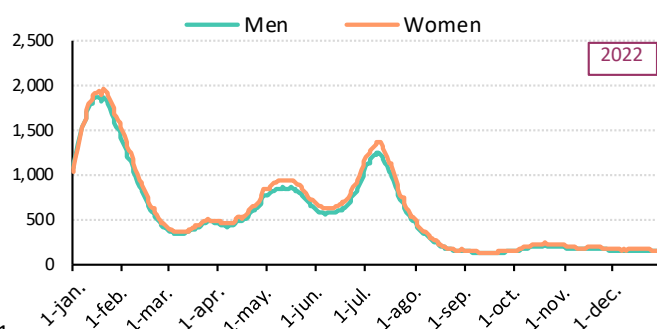

Pandemic evolution indicators

Daily confirmed/ notified cases



6,948,827 new cases in 2022, 45.9% higher than in 2021

14-day cumulative incidence (60 or older)



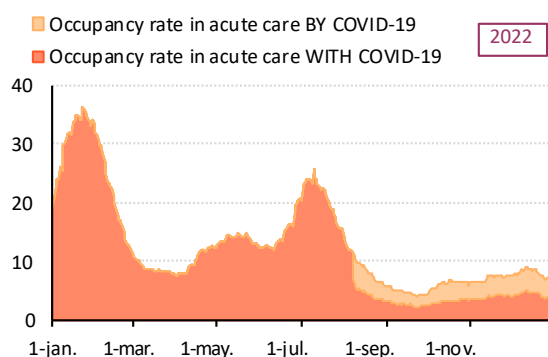
Severity evolution indicators

Lower severity in 2022 than in 2021:

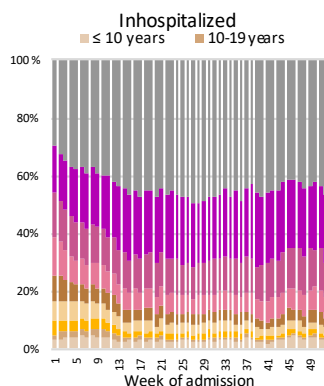
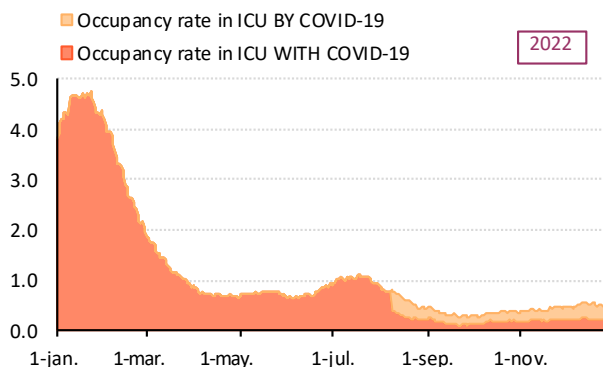
↓ **53%** Acute admissions

↓ **77%** ICU admissions

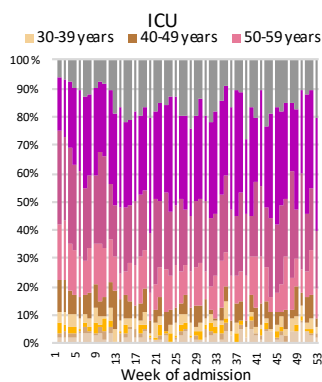
Hospital occupancy rate acute beds per 100,000 inhabitants



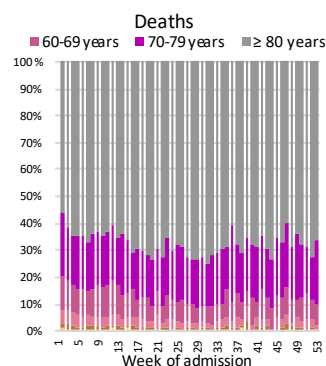
Occupancy rate in ICU per 100,000 inhabitants



↓ **33.7 points**

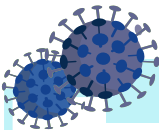


↓ **47.6 points**



26,341 deaths in 2022

↓ **69% in 60 years or older**

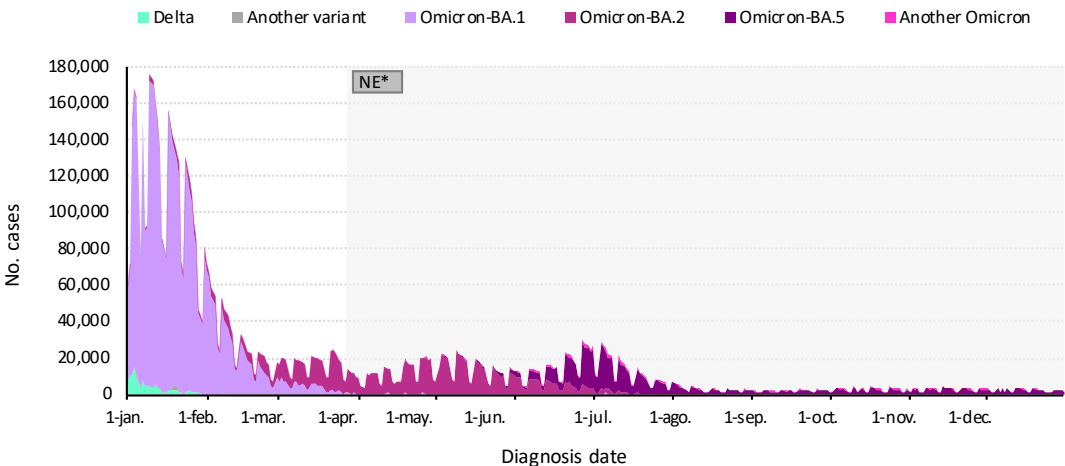


COVID-19

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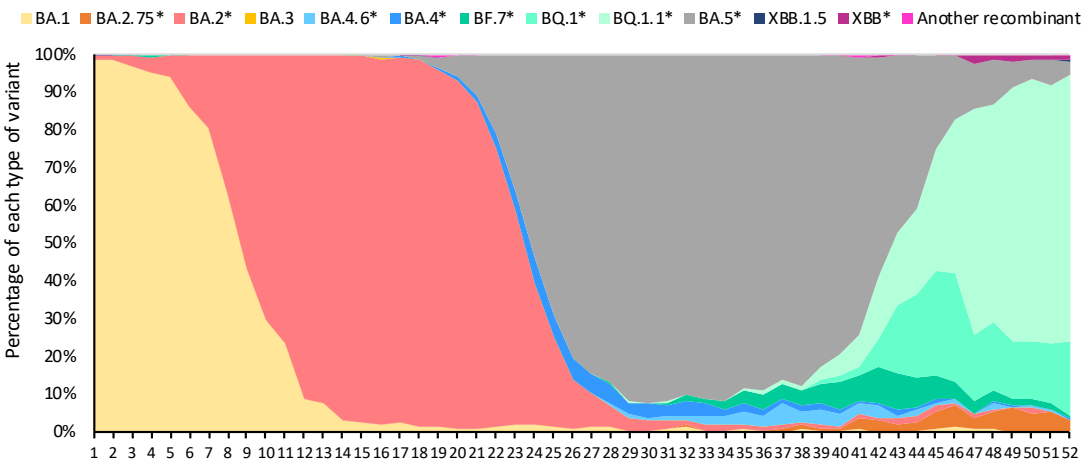
Epidemiological situation of the SARS-COVID variants

Epidemiological curve according to SARS-CoV-2 variants



The dominant variant in 2022 was Omicron.

Omicron's lineages evolution



In 2022 the seventh wave of the pandemic occurred later in Spain than in other European countries.



MORTALITY

GENERAL MORTALITY

2020

2021

493,776 DEATHS:

249,664 in MEN and 244,112 in WOMEN.

GROSS MORTALITY RATE

1,042.7 DEATHS per 100,000 inhabitants:

1,075.7 in MEN and 1,010.9 in WOMEN.

450,744 DEATHS:

231,410 in MEN and 219,334 in WOMEN.

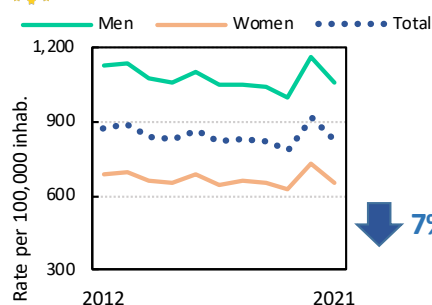
GROSS MORTALITY RATE

953.2 DEATHS per 100,000 inhabitants:

997.8 in MEN and 908.6 in WOMEN.

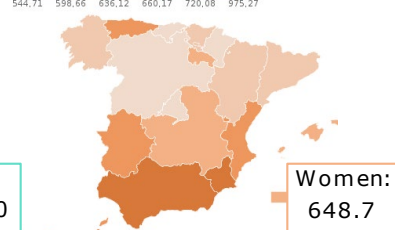


AGE-ADJUSTED MORTALITY RATE per 100,000 inhabitants



918.56 993.86 1023.96 1053.20 1139.86 1300.66

544.71 598.66 636.12 660.17 720.08 975.27



CARDIOVASCULAR DISEASES and CANCER cause more than 50% of deaths.

MORTALITY DUE TO RESPIRATORY DISEASES

CHRONIC OBSTRUCTIVE PULMONARY DISEASE

11,295 DEATHS:

8,100 in MEN and 3,195 in WOMEN

GROSS MORTALITY RATE

24.1 DEATHS per 100,000 inhabitants

PNEUMONIA AND INFLUENZA

6,823 DEATHS:

3,845 in MEN and 2,978 in WOMEN

GROSS MORTALITY RATE

14.5 DEATHS per 100,000 inhabitants

AGE-ADJUSTED MORTALITY RATE per 100,000 inhabitants:

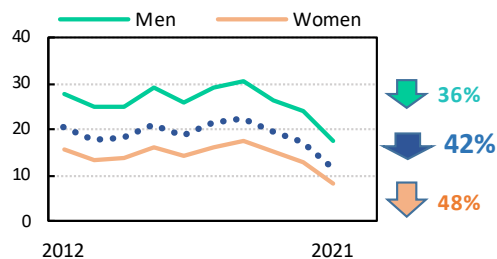
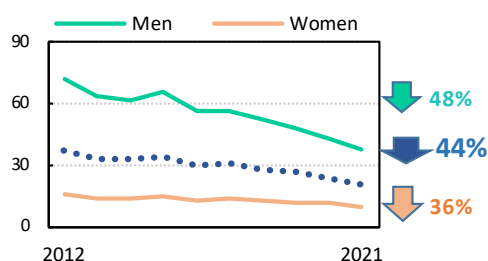
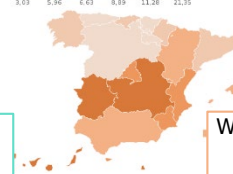


28.07 32.68 37.36 38.76 46.13 56.01

5.25 6.18 9.49 10.37 11.20 25.49

6.54 12.13 14.79 18.58 22.41 34.57

3.03 5.96 6.43 8.89 11.08 21.35

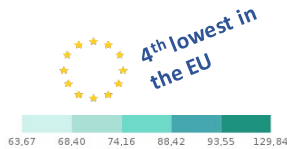
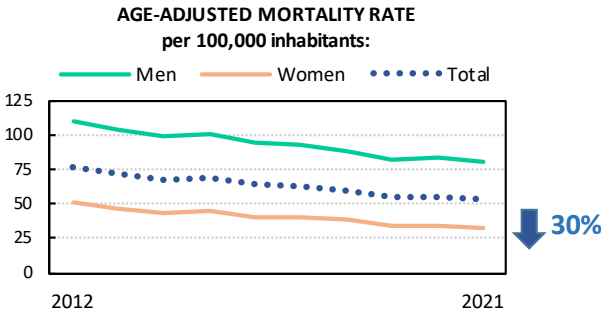


MORTALITY DUE TO CARDIOVASCULAR DISEASE

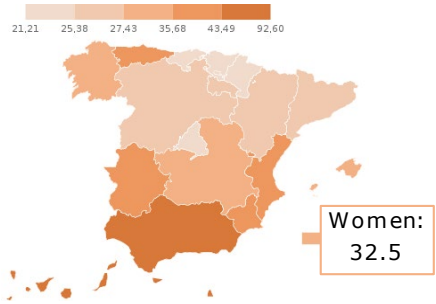
ISCHAEMIC HEART DISEASE

28,852 DEATHS:
17,747 in MEN and 11,105 in WOMEN

GROSS MORTALITY RATE
61.3 DEATHS per 100,000 inhabitants:
76.5 in MEN and 46.0 in WOMEN



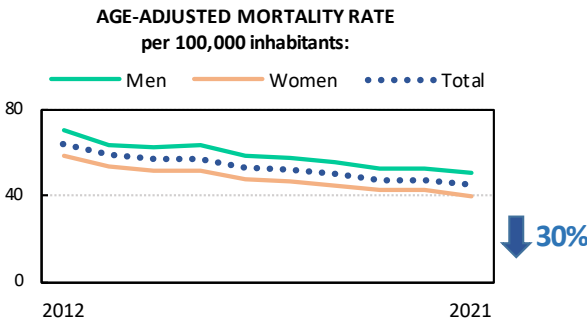
AGE-ADJUSTED MORTALITY RATE
per 100,000 inhabitants:



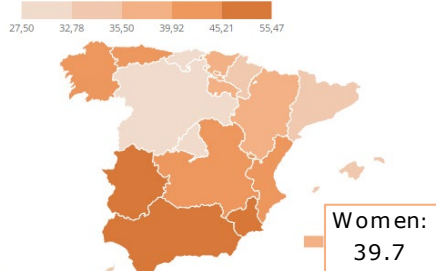
CEREBROVASCULAR DISEASE

24,858 DEATHS:
11,004 in MEN and 13,854 in WOMEN

GROSS MORTALITY RATE
52.4 DEATHS per 100,000 inhabitants: 47.4 in MEN and 57.4 in WOMEN



AGE-ADJUSTED MORTALITY RATE
per 100,000 inhabitants:



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MORTALITY DUE TO MALIGNANT TUMOURS

2021

109,378 DEATHS: 65,558 in MEN and 43,820 in WOMEN,

GROSS MORTALITY RATE

232.1 DEATHS per 100,000 inhabitants:

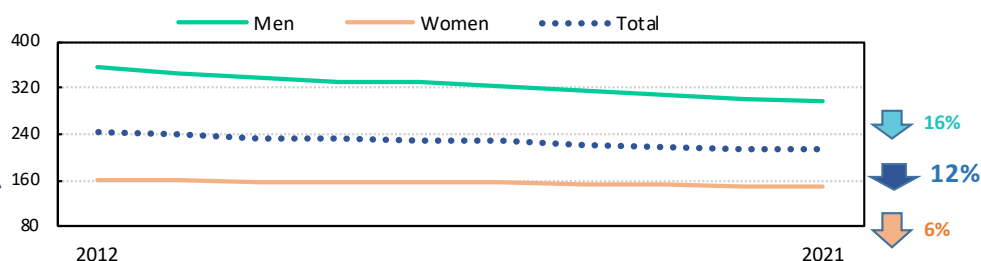
282.7 in MEN and 181.5 in WOMEN.

AGE-ADJUSTED MORTALITY RATE
per 100,000 inhabitants:

252,59 279,60 301,00 309,11 316,94 328,55



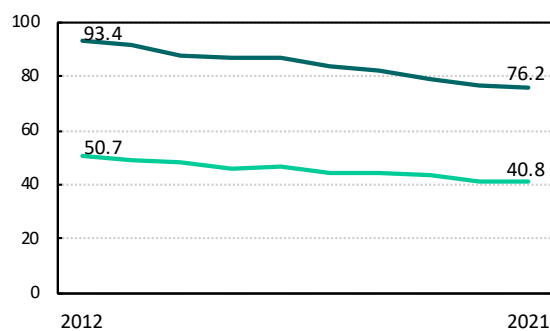
136,60 146,39 151,66 154,01 158,12 180,03



6th lowest in
the EU

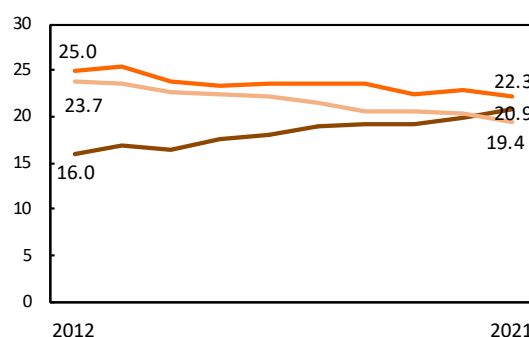
Age-adjusted mortality rate in MEN:

↓ 18% Trachea, bronqui and lungs
↓ 19% Colorectal

AGE-ADJUSTED MORTALITY RATE
per 100,000 inhabitants:

Age-adjusted mortality rate in WOMEN:

↑ 30% Trachea, bronqui and lungs
↓ 18% Colorectal
↓ 11% Breast



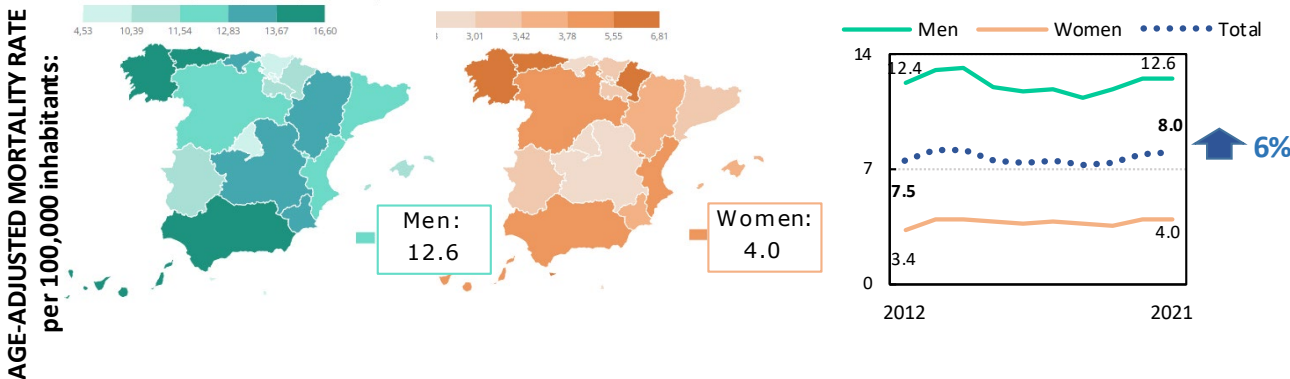
MORTALITY DUE TO SUICIDE

2021

4,005 DEATHS: 2,982 in MEN and 1,023 in WOMEN

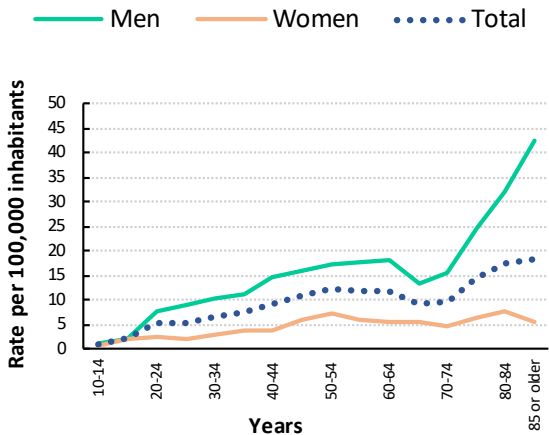
GROSS MORTALITY RATE
8.5 por 100,000 inhabitants:
12.6 in MEN and 4.0 in WOMEN.

6th lowest in
the EU

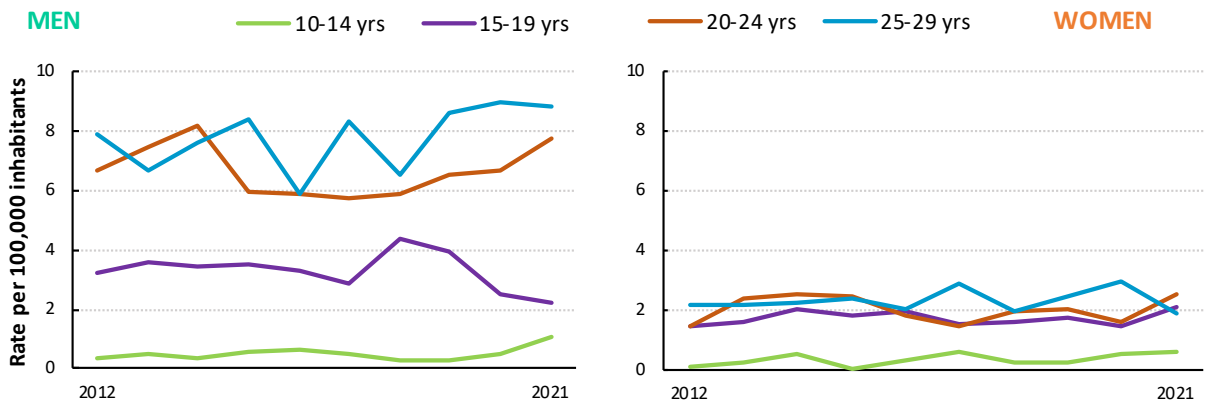


HIGHER in MEN than in WOMEN in all age groups.

Higher in MEN AGED 85 OR OLDER: 42.7 deaths per 100,000, being 7 times higher than that of WOMEN of the same age



Stable trend in the under-30s



MORTALITY DUE TO COVID-19

2020

74,839 DEATHS:

38,917 in MEN and 35,922 in WOMEN

GROSS MORTALITY RATE

158.0 per 100,000 inhabitants.

Age-adjusted mortality:

137.5 deaths per 100,000 inhabitants:

183.2 in MEN and 104.2 in WOMEN

2021

40,039 DEATHS:

22,758 in MEN and 17,281 in WOMEN,

GROSS MORTALITY RATE

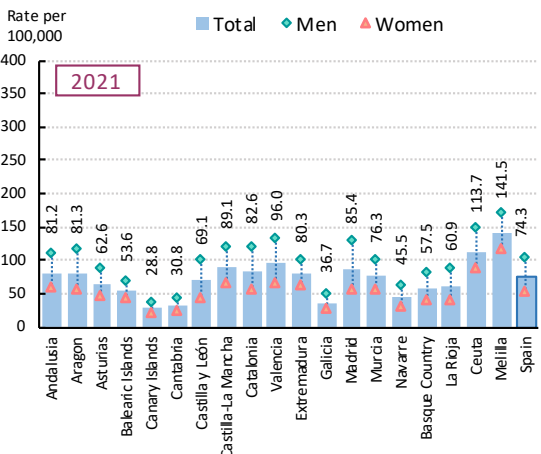
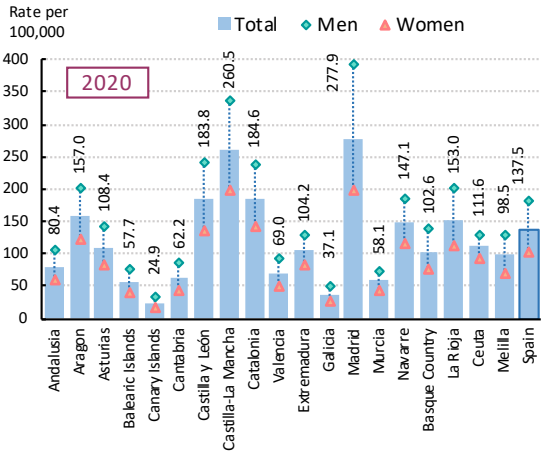
84.6 per 100,000 inhabitants.

Age-adjusted mortality:

74.3 deaths per 100,000 inhabitants:

104.8 in MEN and 51.8 in WOMEN

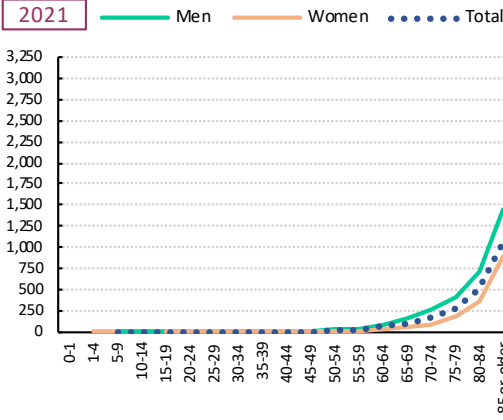
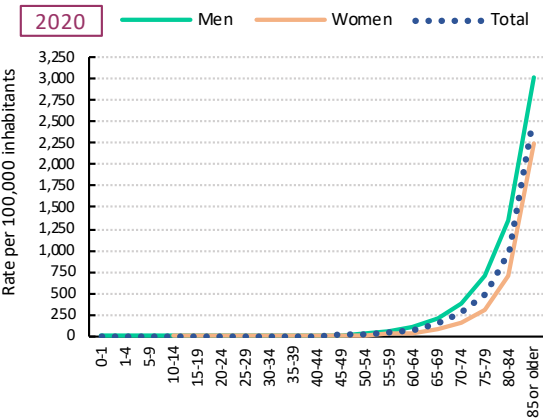
AGE-ADJUSTED MORTALITY RATE
per 100,000 inhabitants:



Gross Mortality rate due to COVID-19 per 100,000 inhabitants, by age group:

85 or older:

Mortality reduction between 2020 and 2021:



52%
56%
60%

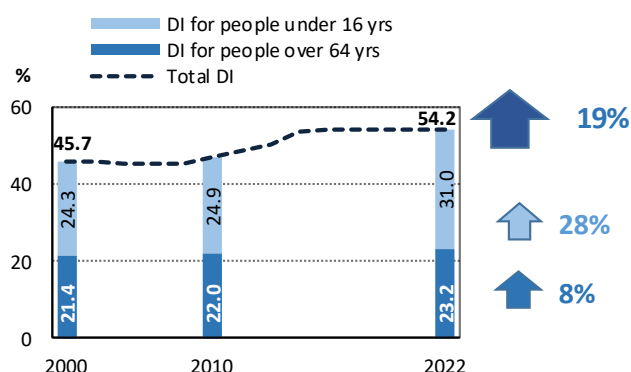
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SOCIO-ECONOMIC DETERMINANTS

DEPENDENCY RATIO

The Dependency Index (DI) in Spain is **54.2%**, with a rising trend among older people (**31.0%**) and a stable trend for the young (**23.2%**).

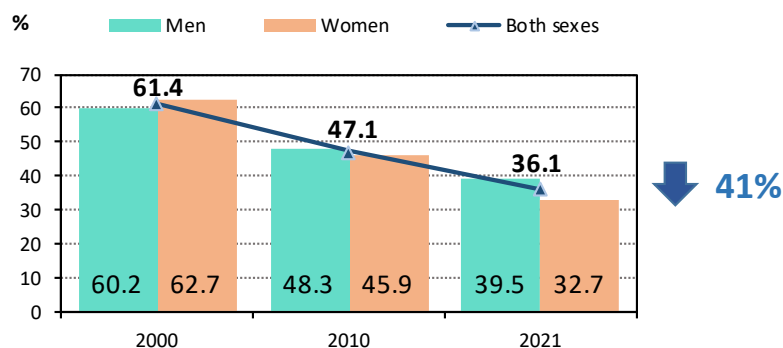
6th highest in the EU



PERCENTAGE OF 25-64 YEAR-OLDS WHO HAVE NOT ATTAINED UPPER SECONDARY EDUCATION

In the past 18 years, the percentage of people with basic or lower-level education **has decreased in all Autonomous Communities and Autonomous Cities.**

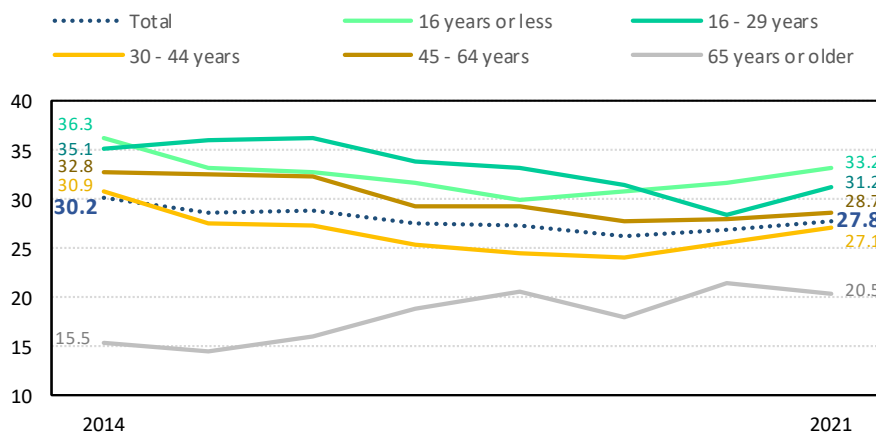
4th highest in the EU



POVERTY RISK (AROPE)

The at-risk-of-poverty or social exclusion rate for 2021 is **27.8%**

Above the European average



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LIFESTYLE

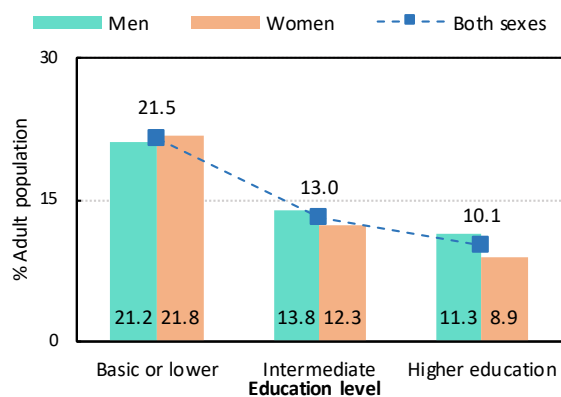


OBESITY

2 out of every 10 adults are obese



The lower the level of education, the higher the prevalence of obesity.

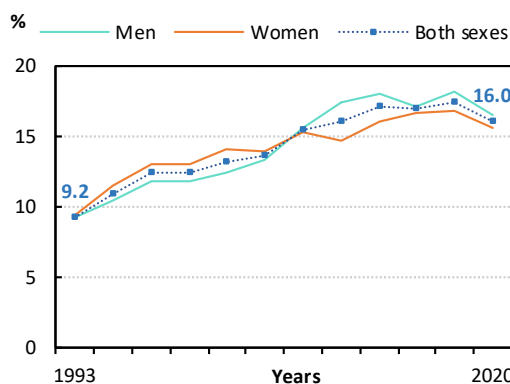


Population of 18 or over with obesity

6,81 13,47 14,24 16,24 17,09 19,67



9th lower in the UE

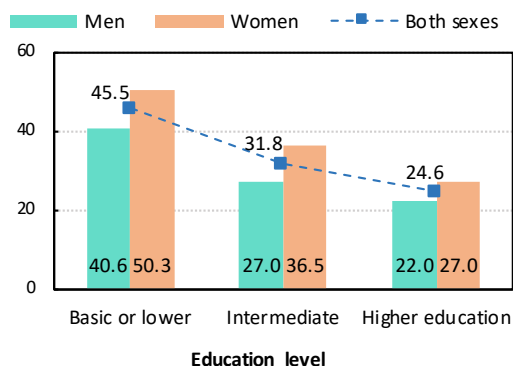


PHYSICAL ACTIVITY

4 out of every 10 adults declares to be sedentary in their leisure time.



Sedentary lifestyles are more prevalent among people with lower levels of education.

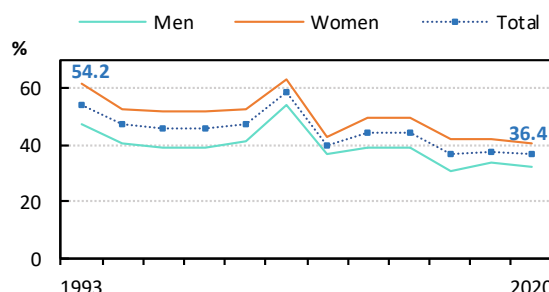


Population of 15 or over that declares to be sedentary in their leisure time

20,87 24,92 34,04 39,61 42,52 61,48



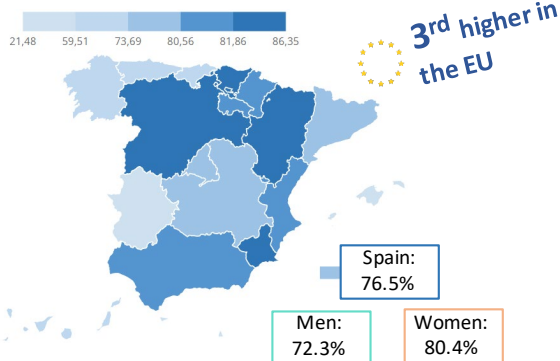
15th position in EU-27 in spending zero minutes a day on physical activity



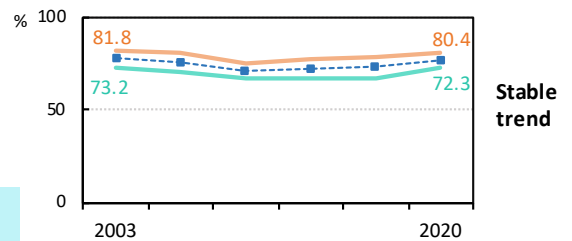
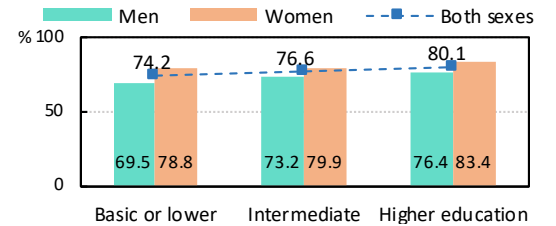
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FRUIT AND VEGETABLES CONSUMPTION

76.5% de la población de aged 15 or older consumes daily fruit and vegetables



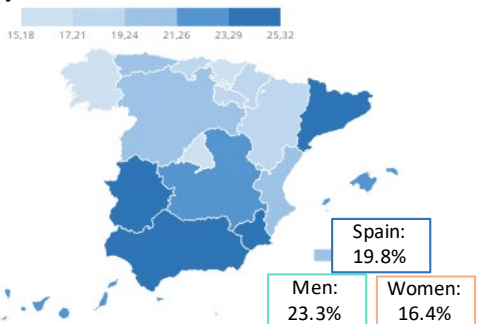
Highest daily consumption at higher education level



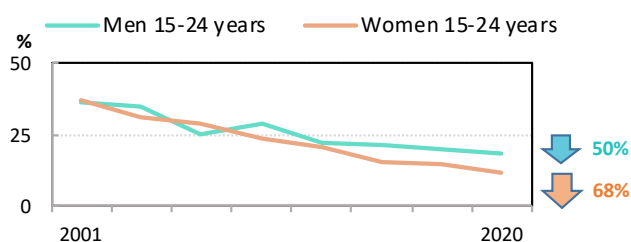
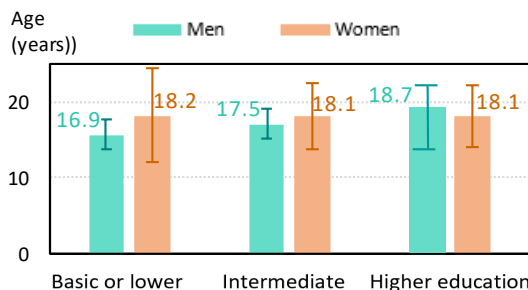
TOBACCO AND CANNABIS CONSUMPTION

Tobacco

19.8% of the population aged 15 or older smokes every day

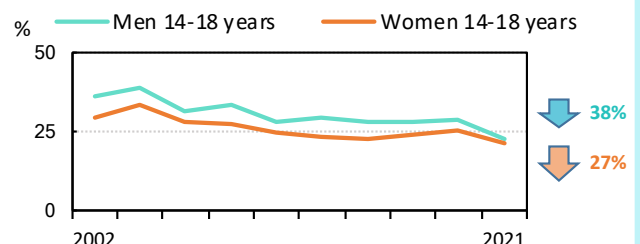
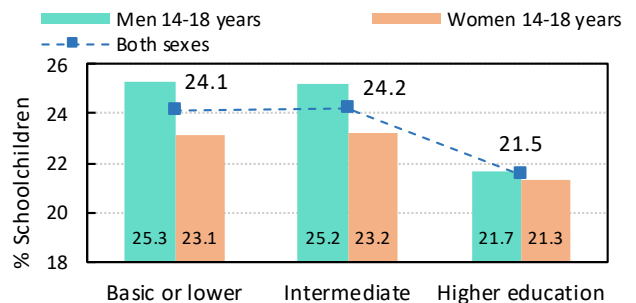
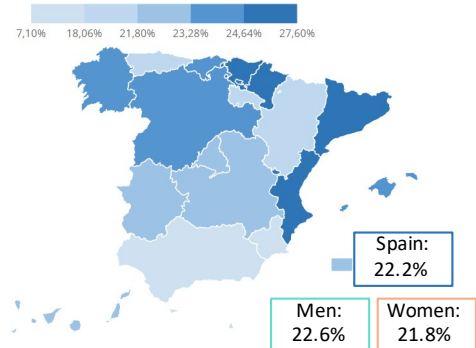


Average age of onset **17.7 years** (sd= 4.8)



Cannabis

22.2% of students aged between 14 and 18 consume cannabis

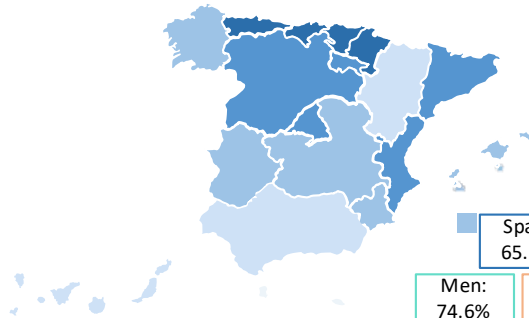


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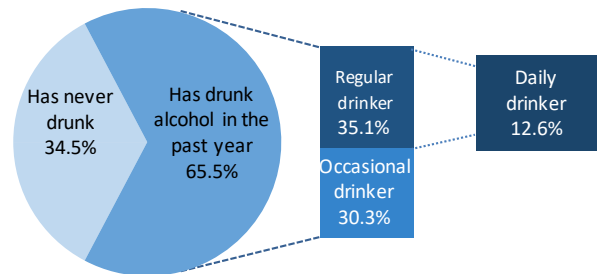
ALCOHOL CONSUMPTION

65.5% of the population aged 15 and over declares having consumed alcohol in the last year.

32.85 53.31 61.33 69.76 73.15 77.94



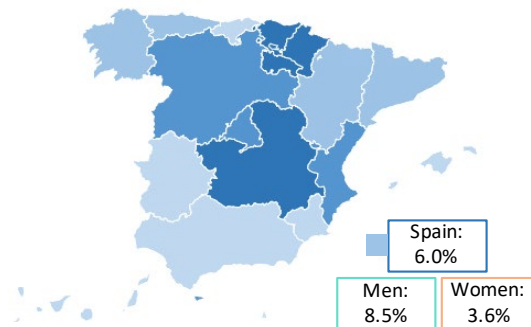
35.1%, consumes alcohol regularly



Binge drinking of alcohol

6.0% of adult population declares **binge drinking of alcohol** at least one per month in the last year.

1.00 2.00 4.00 6.00 9.00 17.00



11.3% of youth declares a **binge drinking of alcohol**

Men
13.0%

Women
9.5%

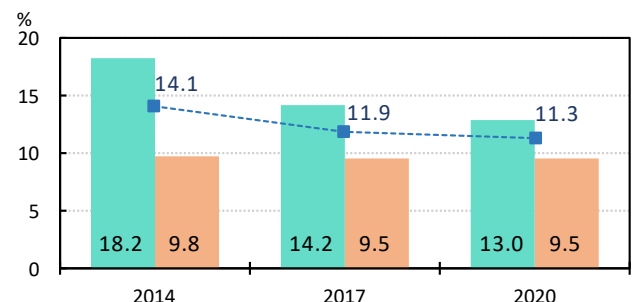
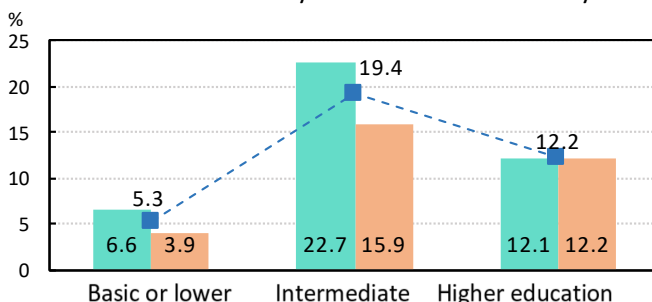
39% lower than the EU average

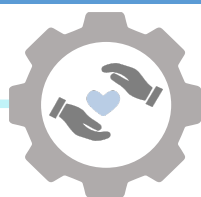
Highest consumption in the intermediate level of education, 19.4%

Downward trend in boys, stable in girls

Men 15-24 years Women 15-24 years

Both sexes



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HEALTHCARE

PREVENTION

Vaccination



Population under 4 years of age

Primary vaccination **COVERAGE** against:

Poliomyelitis	97%
DTaP	
Hib	
Hepatitis B	
Pneumococcal disease	

Measles	96%
Rubella	
Mumps	93%
Chickenpox	

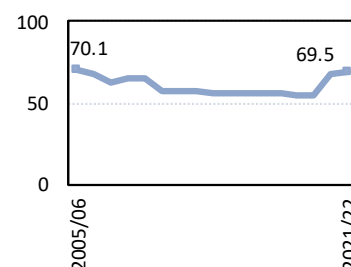
5th highest in the EU

People aged 65 and older

31,20 40,97 50,75 60,53 70,30 80,08

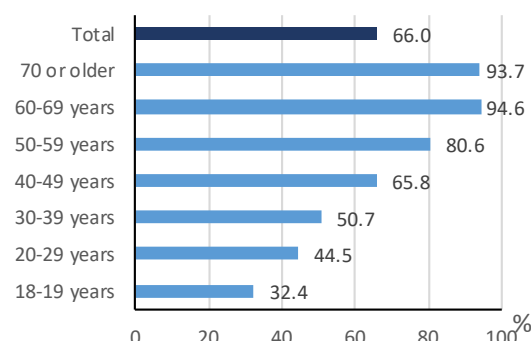
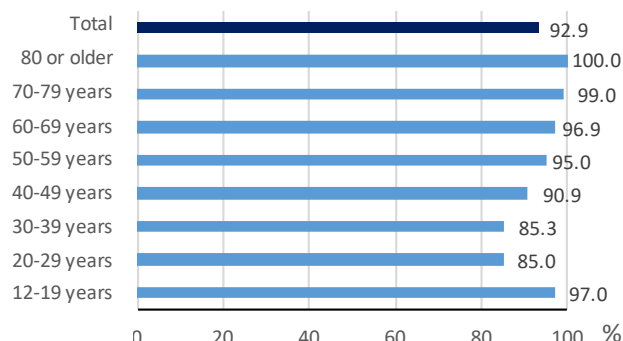
Vaccination **COVERAGE** against **INFLUENZA**:

2021/2022 campaign

**27%** compared to 2019/20 campaign5th highest in the EU

COVID Vaccination

82,40% 90,50% 92,80% 94,00% 96,10% 97,50%

3rd highest in the EUFully **VACCINATION** **COVERAGE** against **COVID-19**Spain: **92.9%****80 or older: 100%****COVERAGE** of population vaccinated against **COVID-19** with 1st booster dose:Spain: **66.0%****70 or older: 93.7%**

PREVENTION

Cancer screening



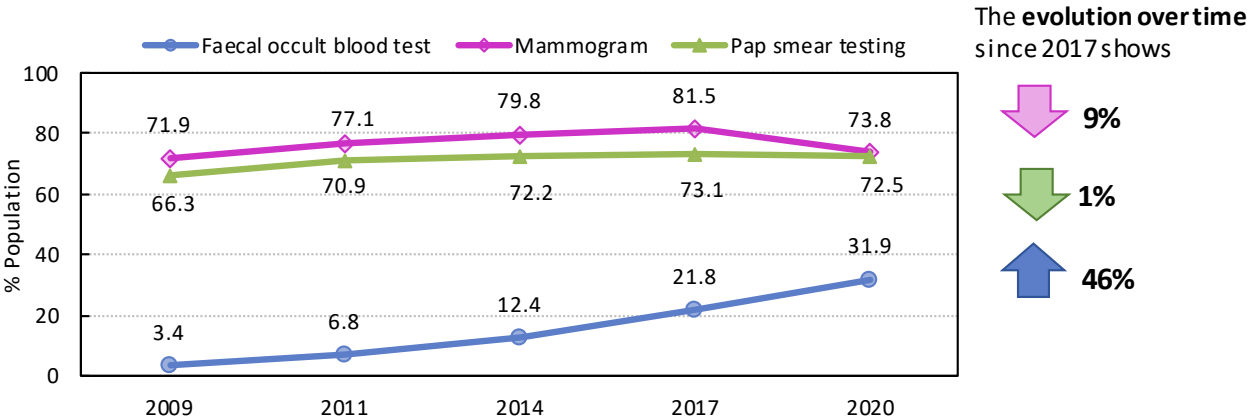
7 out of every **10 women** have undergone **breast cancer detection tests** within the recommended periods.



7 out of every **10 women** between 25 and 65 years have had a pap smear test in the past 3 months.



3 out of every **10 people** have undergone **early colorectal cancer detection tests** within the recommended period.



Mammogram

9th position in EU-27 ranking

Pap smear testing

17th position in EU-27 ranking

Faecal occult blood test

15th position in EU-27 ranking

PRIMARY CARE

DOCTORS in SNS PRIMARY HEALTHCARE have

262 M consultations:

99.0% of them at **HEALTHCARE CENTRES:**

46.6% CENTRE and **52.4% TELECONSULTATIONS**

1.0% of them at **PATIENTS' HOME.**

NURSES in SNS PRIMARY HEALTHCARE have

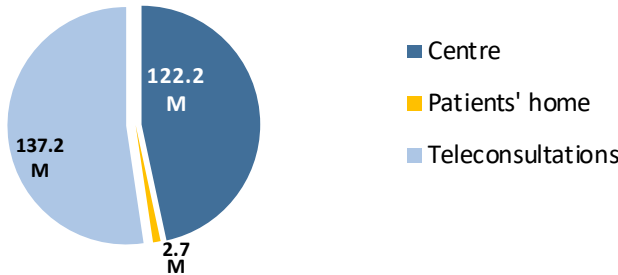
191 M consultations:

94.4% of them at **HEALTHCARE CENTRES:**

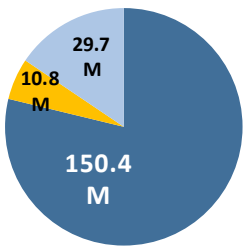
78.8% CENTRE and **15.6% TELECONSULTATIONS**

5.6% of them at **PATIENTS' HOME.**

Doctors consultations



Nursery consultations

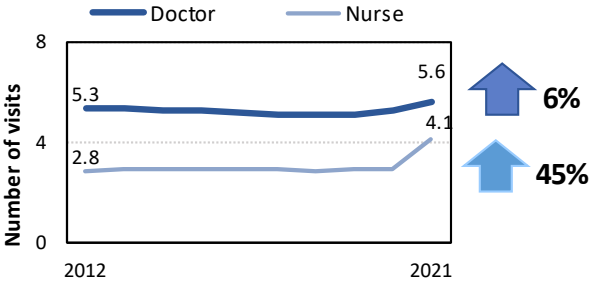
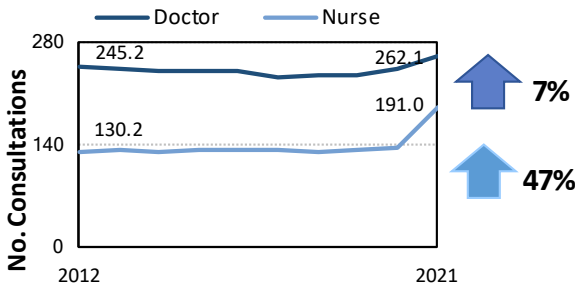
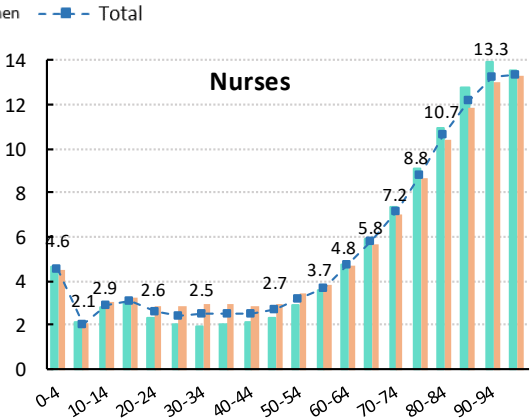
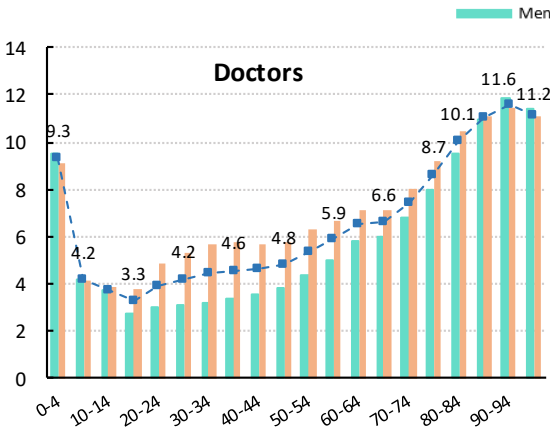


Average frequency:

5.6 visits per person and year.

Average frequency:

4.1 visits per person and year.



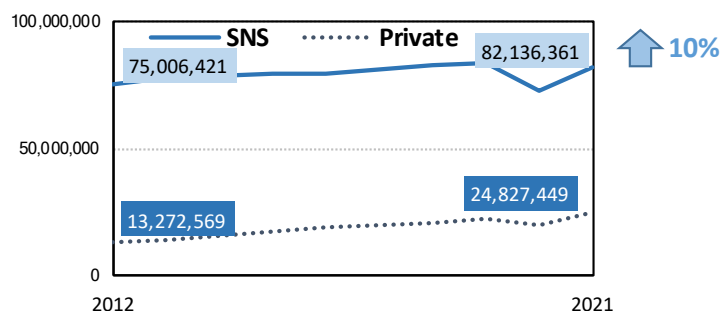


HOSPITAL CARE

Hospital Care Consultations

In **SNS HOSPITAL CARE**
82.1 M CONSULTATIONS.

Nearly **77%** of specialized care consultations at acute care hospitals take place in the **SNS**.



SPECIALISTS consultations at **SNS HOSPITALS** amount to **1.7 consultations/hab.**

Hospital Admissions


In **SNS HOSPITALS** there are **3.8 M ADMISSIONS** per year:

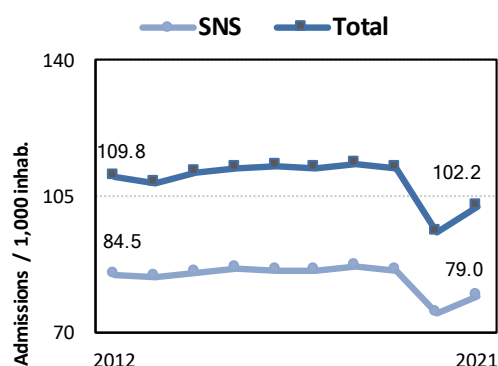
3.7 M in ACUTE CARE HOSPITALS, representing **75.8%** of the Spanish hospital sector.

87,810 in LONG-TERM CARE HOSPITALS, representing **87.4%** of the Spanish hospital sector.

79.0 ADMISSIONS

per 1,000 inhabitants and year, in **SNS ACUTE CARE HOSPITALS**

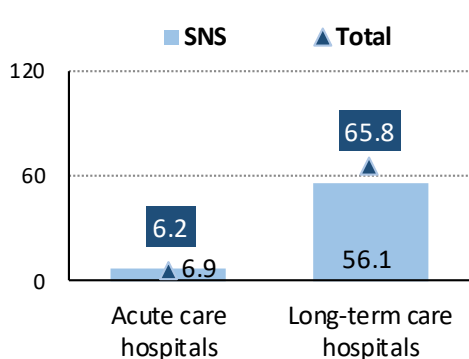
 Hospital discharges per 1,000 inhabitants in Spain are about 1.6 times lower than the EU-28 average, while processes attended in day hospital are about 1.2 times higher.



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HOSPITAL CARE

Average stays at hospitals

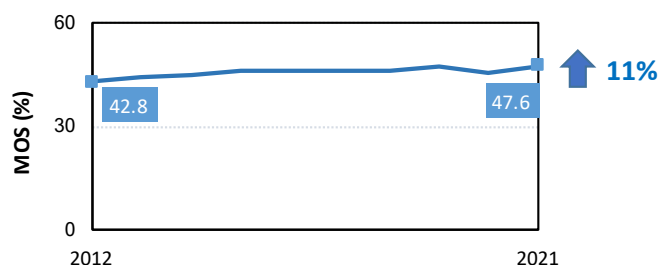


8.0 days of average stay of patients admitted to **SNS hospitals**:

- Acute care hospitals **6.9 days**
- Long-term care **56.1 days**

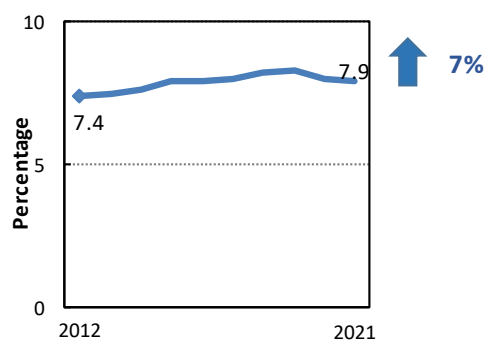
The **turnover rate** in SNS hospitals is **33.5** patients per bed.

Outpatient surgery in the National Health System



Major outpatient surgery
47.6% in SNS hospitales

Overall percentage of readmissions in acute care hospitals of the National Health System



The overall percentage of **readmissions in SNS acute care hospitals** during the 30 days after discharge is **7.9%**, with a slightly upward trend until 2019 (8.3%) and then reverse.

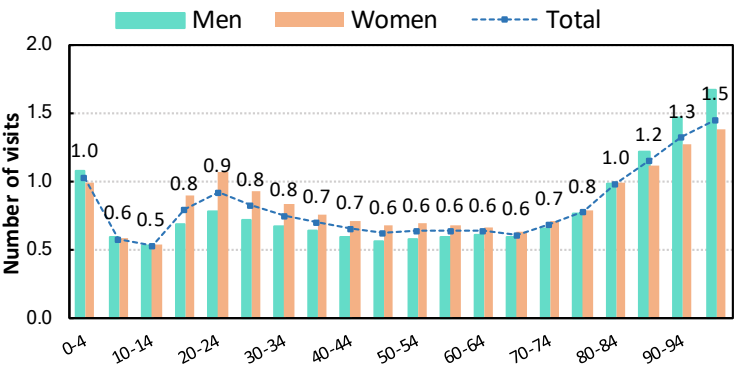
URGENT CARE

Primary Care

29.7 M urgent consultations in
PRIMARY CARE:
DOCTORS: 21.7M
NURSES: 9.6M

The data on urgent primary care consultations reflect **SIGNIFICANT DIFFERENCES BY SEX** which ARE **INVERTED** over the individual's lifespan.

Urgent consultations 0.64 consultations
per inhabitant and year:

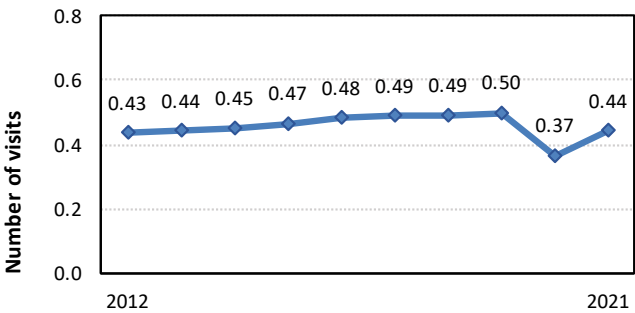


Hospital Care

20.9 M urgent consultations in **SNS ACUTE CARE HOSPITALS.**

SNS HOSPITAL urgent consultations :
0.44 consultations per inhabitant and year.

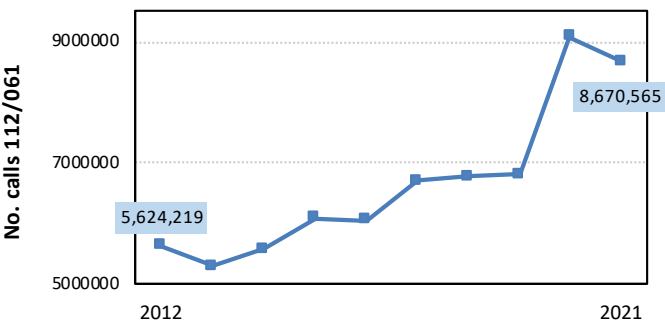
Urgent hospital consultations remains stable since 2012 except for the fall in the year 2020 of the pandemic.



112/061 Urgent and Emergency Care Service

8.7 M phone calls to 112/061:
185.8 per 1,000 inhabitants

Irregular evolution, but with a clear **rise in numbers.**



MORBIDITY

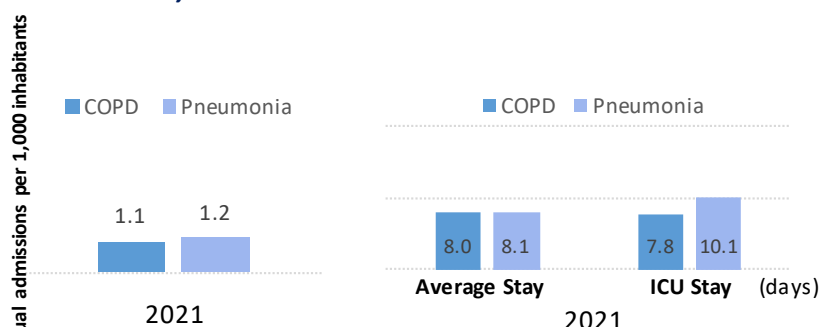


CARE FOR RESPIRATORY DISEASES

2020

12.6 visits per year for people with respiratory disease at **PRIMARY CARE** centres, nearly **20% more** than the **general population**.

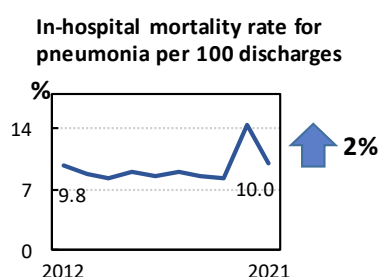
441,924 annual ADMISSIONS



2021

14.4 visits per year for people with respiratory disease at **PRIMARY CARE** centres, nearly **30% more** than the **general population**.

290,059 annual ADMISSIONS

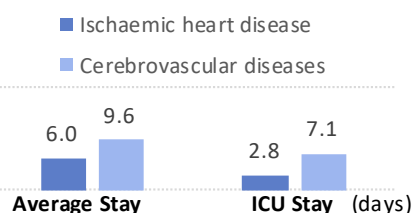
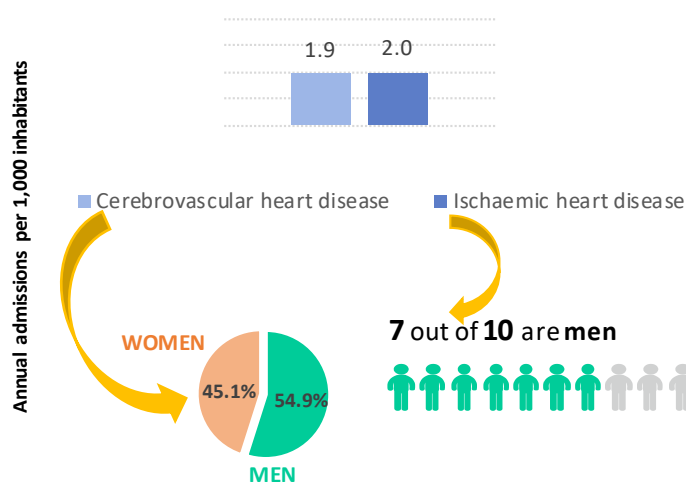


CARE FOR CARDIOVASCULAR DISEASE

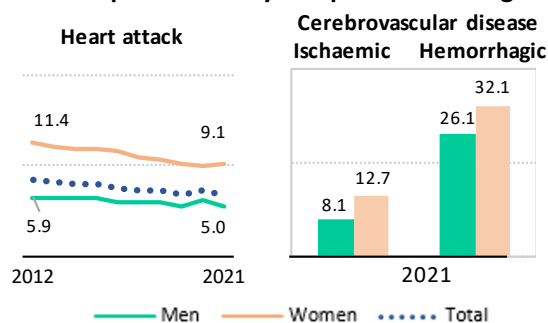
25.3 visits per year for people with cardiovascular disease at **PRIMARY CARE** centres, nearly **30% more** than the **general population**.

491,122 annual ADMISSIONS

Cardiovascular diseases are the **most frequent cause** of hospitalization, accounting for **14%** of admissions to the SNS, highlighting:



In-hospital mortality rate per 100 discharges:





CARE FOR MENTAL DISORDERS

Consultations and hospitalizations

15.1 visits to **PRIMARY CARE** centres per year per person with **mental illness**, about **40% more** than the general population.

5,654,449 annual psychiatry consultations, around the **95%** in public centres.

1.6 hospitalizations por 1,000 inhabitants.

Drug consumption

CONSUMPTION OF ANTIDEPRESSANTS

49,22 81,52 88,84 95,47 104,39 139,91



Consumption of **antidepressants** in one year in Spain:

92.7 DDI*

3rd
posición
de la UE

CONSUMPTION OF HYPNOTICS AND SEDATIVES

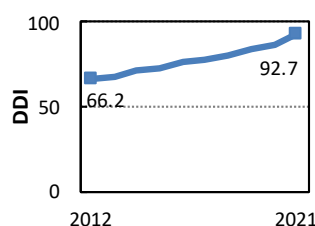
18,50 29,39 37,05 40,50 43,26 63,07



Consumption of **hypnotics and sedatives** in one year in Spain:

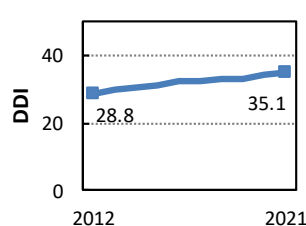
35.1 DDI*

71% higher
than EU
consumption



Consumption of **antidepressants** has increased by:

↑ **40%**

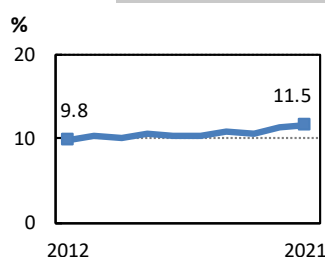


Consumption of **hypnotics and sedatives** has increased by:

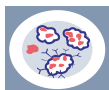
↑ **22%**

*DDI = Defined daily doses per 1,000 inhabitants per day

Emergency psychiatric readmissions



Emergency psychiatric readmissions have remained stable at approximately **10%**, with a slight increase in the last 2 years.



TREATMENT FOR MALIGNANT TUMOURS

Primary care consultations and hospitalizations

21.5 visits to **PRIMARY CARE** centres per year per person **with malignant tumours**, twice as high as in **general population**.

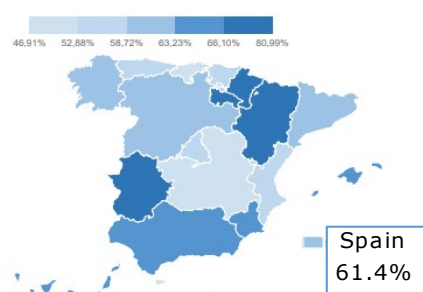
6.1 hospitalizations per 1,000 inhabitants.

Breast-conserving surgery for breast cancer

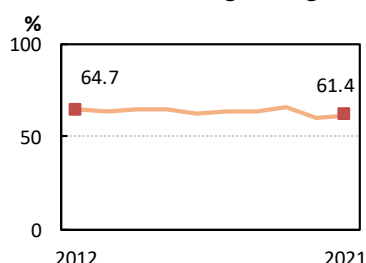


Nearly **6** out of **10 breast cancer surgeries** are carried out with a **conservative approach**.

The percentage of breast-conserving surgery for breast cancer is **61.4%**.



Conservative breast cancer surgery shows fluctuations in the trend, reaching the highest value, **65.5%, in 2019**:



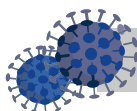
Between 2019-2020:

↓ **9%**

Between 2020-2021:

↑ **2%**

8th
highest in
the EU



CARE FOR COVID-19

2020

18.4 visits to **PRIMARY CARE** centres per year per person with **COVID-19**, twice as high as in **general population**.

4.4 hospitalizations por 1,000 inhabitants:

11 days of average stay

16 days of average stay in ICU

2021

14.5 visits to **PRIMARY CARE** centres per year per person **with COVID-19**, around **30% higher** than general population.

4.5 hospitalizations por 1,000 inhabitants:

11 days of average stay

20 days of average stay in ICU



Nearly **6** out of **10 hospitalized people** are **men**

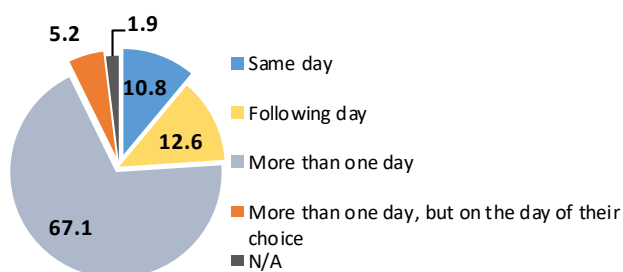


ACCESSIBILITY

WAITING TIMES IN PRIMARY CARE

10.8% of the people surveyed were attended to on the **same day** that they asked for the appointment, **12.6%** the **following day** and **67.1%** had to wait **more than one day**.

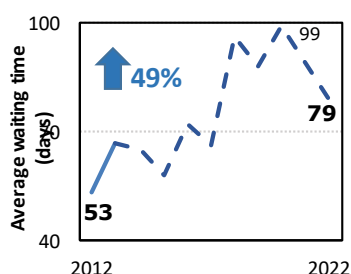
Average waiting time is **8.8 days**.



WAITING TIMES IN SPECIALIZED CARE

CONSULTATIONS

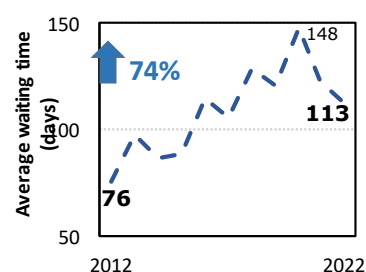
The average waiting time for a first consultation in specialized care is **79 days**



Waiting times for specialized care **CONTINUE TO DECLINE** since 2020.

NON-URGENT SURGERY

The average waiting time for non-urgent surgery is **113 days**



The percentage of patients who have been **WAITING MORE THAN 6 MONTHS** is **17.6%**

SPECIALITIES WITH THE LONGEST WAITING TIMES

NEUROLOGY: 97 days; 3.4 patients/1,000 inhab.
DERMATOLOGY: 84 days; 7.9 patients/1,000 inhab.
DIGESTIVE: 55 days; 2.6 patients/1,000 inhab.

Longest WAITING TIMES :

PLASTIC SURGERY : 226 days; 0.5 patients/1,000 inhab.
NEUROSURGERY : 193 days; 0.3 patients/1,000 inhab.
TRAUMATOLOGY (134 days)

Highest no. of PATIENTS on waiting lists:
4.1 patients/1,000 inhab.



PATIENTS' EXPERIENCE

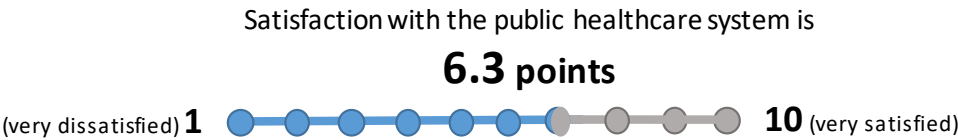
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ASSESSMENT OF THE PUBLIC HEALTHCARE SYSTEM

57.1% of the population state that it **works well or very well**

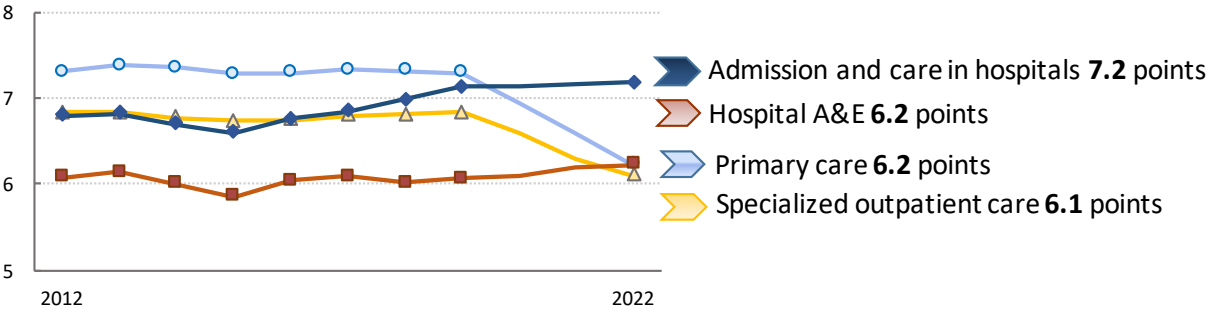
Satisfaction with the public healthcare system



Assessment of healthcare levels

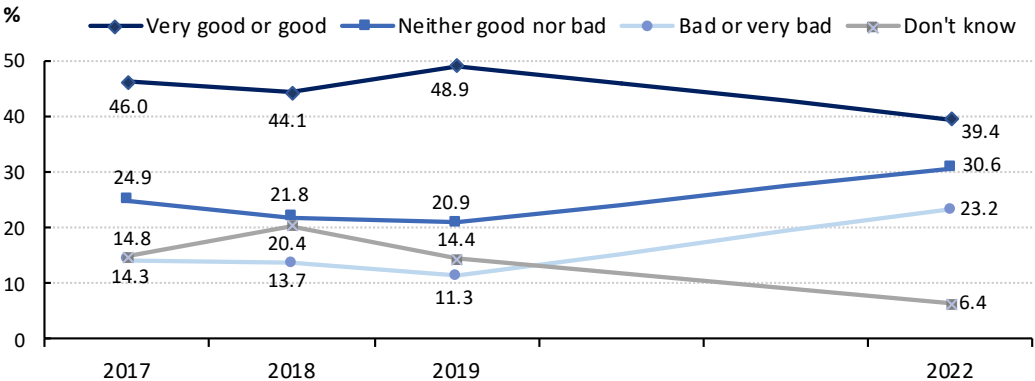
- Primary care
- Specialized outpatient care
- Hospital A&E
- Admission and care in hospitals

General public opinion remains **positive**, although has worsened about primary care and specialized outpatient care.



COORDINATION BETWEEN HEALTHCARE LEVELS

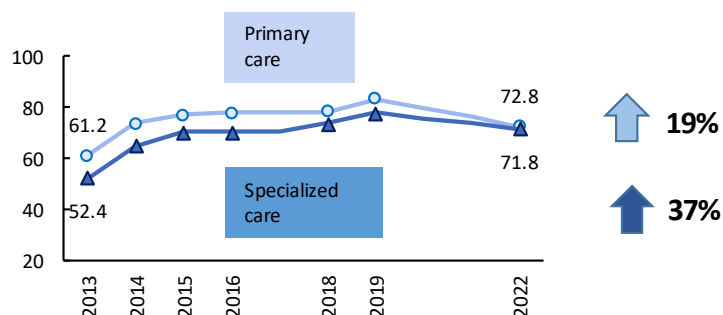
The perception of **good coordination** between healthcare level is slightly below **40%**



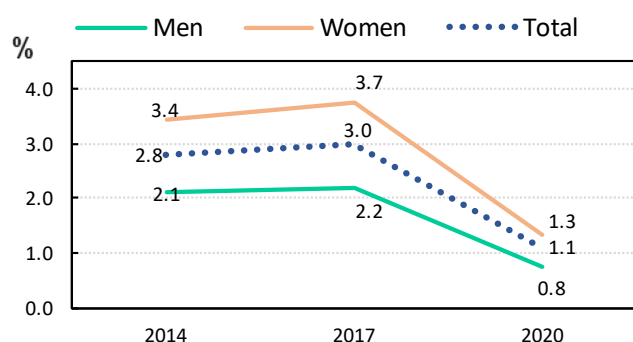
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PARTICIPATION IN DECISION-MAKING REGARDING THEIR HEALTHCARE

72.8% state that they participate in decision-making regarding their health condition and treatment in primary care, and **71.8%** in specialized care



STATED LACK OF ACCESS TO PRESCRIPTION DRUGS FOR ECONOMIC REASONS



1.1% state that they have problems accessing prescription drugs for economic reasons

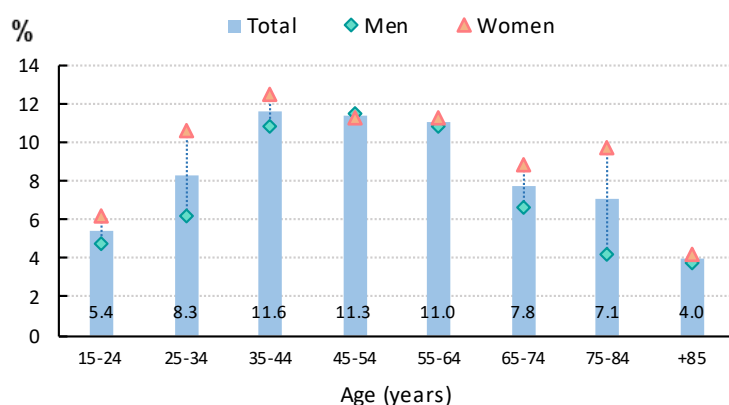


62%

2nd in the EU with the best accessibility to prescription drugs.



STATED LACK OF ACCESS TO DENTAL CARE FOR ECONOMIC REASONS



9.3% state that they have problems accessing dental care for economic reasons:

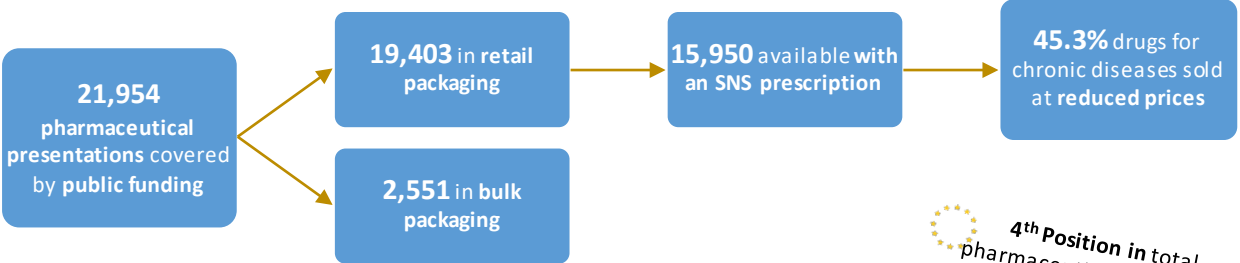
MEN: 8.4%
WOMEN 10.0%

HIGHER inaccessibility in people aged between 35 and 64 years

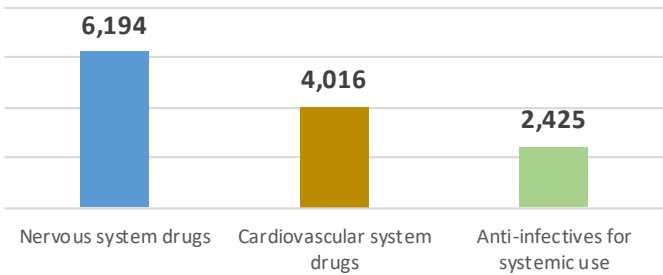


PHARMACEUTICAL BENEFITS

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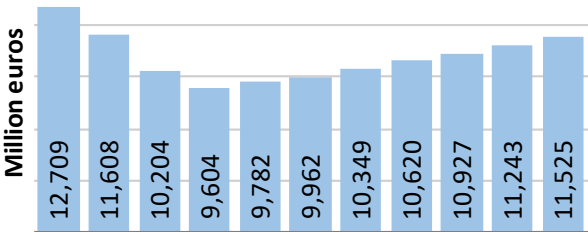
4th Position in total pharmaceutical sales among neighbouring countries (20.802 million euros).



Main presentations covered by public funding (number)

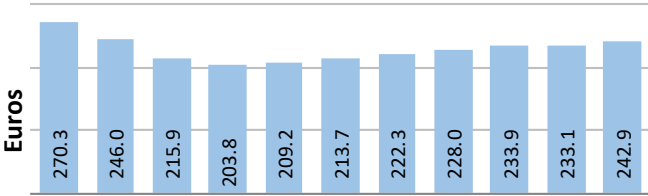
CONSUMPTION THROUGH SNS MEDICAL PRESCRIPTIONS AT PHARMACIES

Pharmaceutical expenditure through the invoicing of SNS drug prescriptions



In 2020, the pharmaceutical expenditure charged to public funds totalled **11,525 million euros, up to 2.5% compared with 2019**, although between 2010 and 2020 it has decreased by 9.3%.

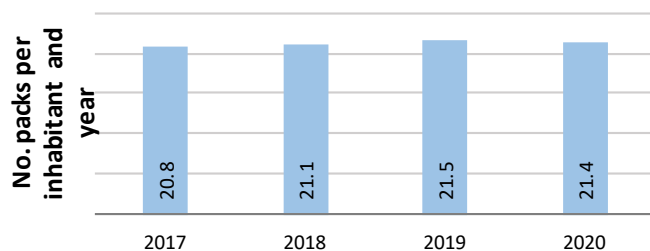
SNS pharmaceutical expenditure per inhabitant and year



The **expenditure per inhabitant and year** in 2020 amounted to **242.9 euros, up to 4.2% compared with 2019**. Since 2013 the expenditure per inhabitant has been increasing, although the figure for 2020 remains below 2010 and 2011 values

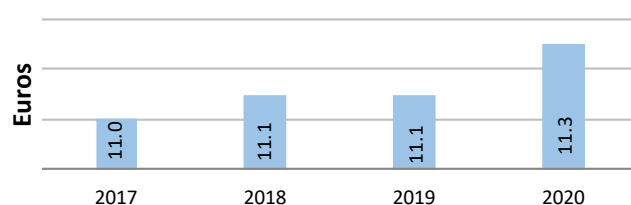
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Packs per inhabitant and year



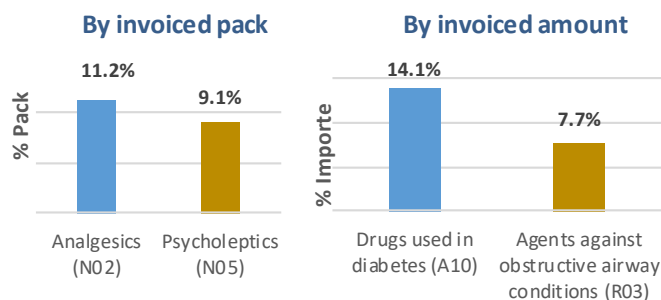
The **consumption of medicinal packages per inhabitant** in **2020** was **21.4**, 0.5% less than in 2019, although it has grown by 2.9% between 2010 and 2020.

Average expenditure per medicinal package dispensed



The **average expenditure per medicinal package** in **2020** was **11.3 euros**, up by **0.2 euros** compared with 2019.

Principal active ingredients consumed



Consumption of generic drugs

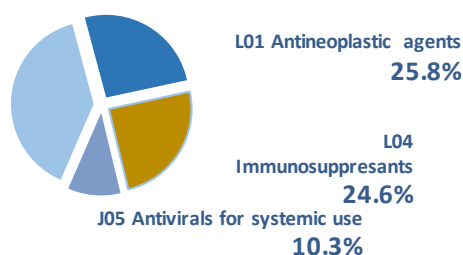
Per medicinal package dispensed Per amount of medicinal product dispensed



Average position in consumption of generic medicines by invoiced amount among neighbouring countries

HOSPITAL PHARMACEUTICAL SERVICE

Principal therapeutic sub-groups consumed at manufacturers' prices

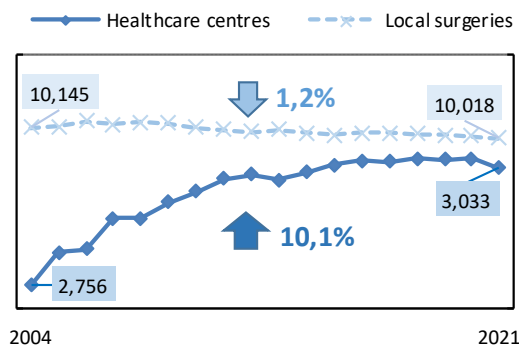


The **three subgroups** represent the **60.7%** of consumption in public hospitals of SNS.



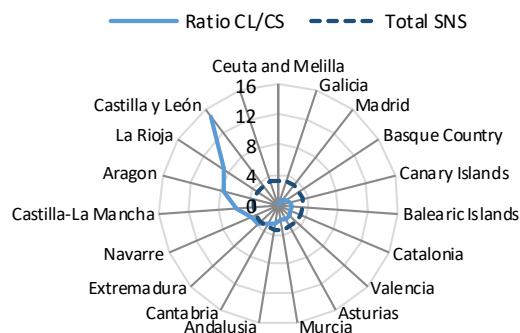
PHYSICAL RESOURCES

PRIMARY CARE



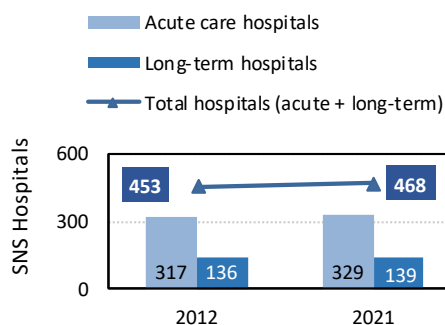
Since 2004 the number of **HEALTHCARE CENTRES** has been increasing to amount to **3,033** in 2021, and has been above 3,000 since 2009

The average number of **local surgeries per healthcare centre** is **3.3**, with considerable variability between territories, which reflects the variable geographical dispersion of the population in Spain.



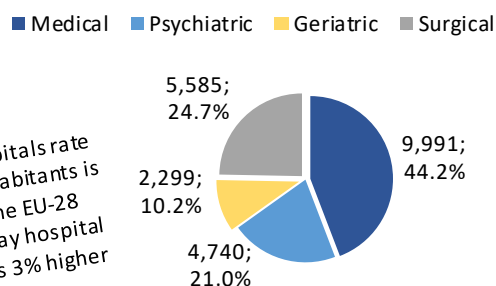
SPECIALIZED CARE

The **SNS** has **468 HOSPITALS**:
329 ACUTE CARE HOSPITALS and
139 LONG-TERM CARE HOSPITALS.

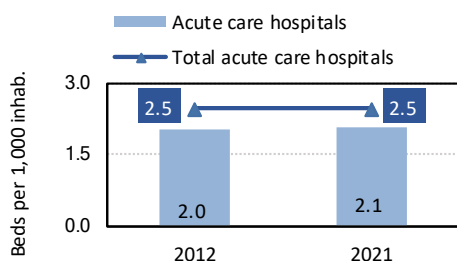


Acute care hospitals rate per 100,000 inhabitants is lower than the EU-28 average, but day hospital stations rate is 3% higher

The **SNS** has **19,700 day hospital stations**, representing **87.1%** of the total in the health system, and an **increase of 21.8%** since 2012.



The **SNS** has **114.195 beds**

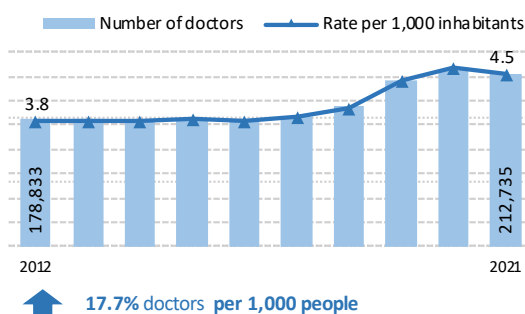
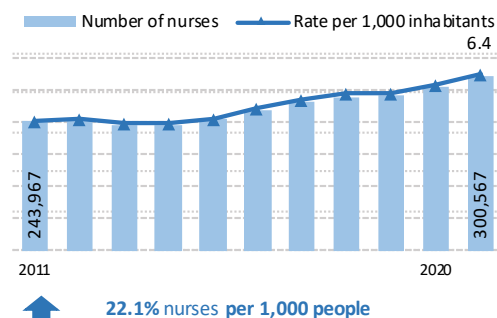


The network of SNS hospitals has **281 RADIOTHERAPY MACHINES**, representing **82.9%** of the 339 equipments available in the Spanish health system.

In 2022 the SNS has **296 specialist centres, services and units**.

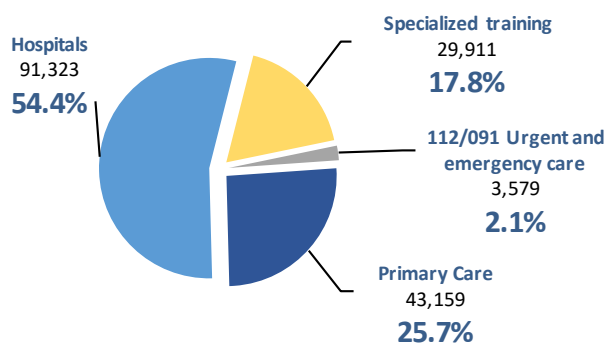
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HUMAN RESOURCES

Practising doctors
(public and private sector)Practising nurses
(public and private sector)

SNS DOCTORS

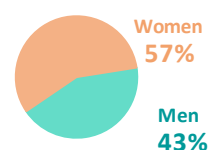
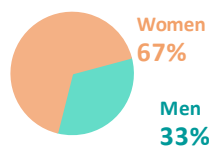
54.4% of SNS doctors work in hospitals, and 25.7% in primary care.



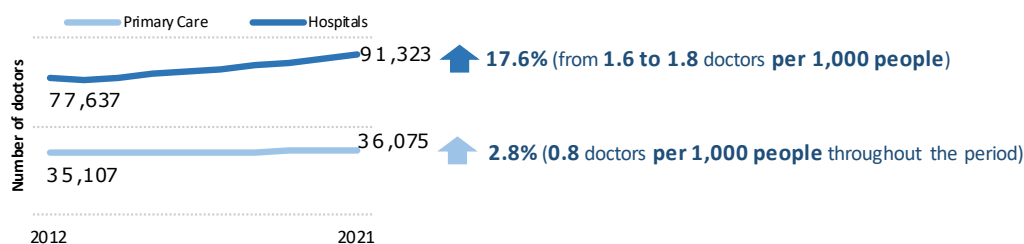
3.5 doctors per 1,000 people

Primary care:
0.9 / 1,000

Hospitals:
1.9 / 1,000



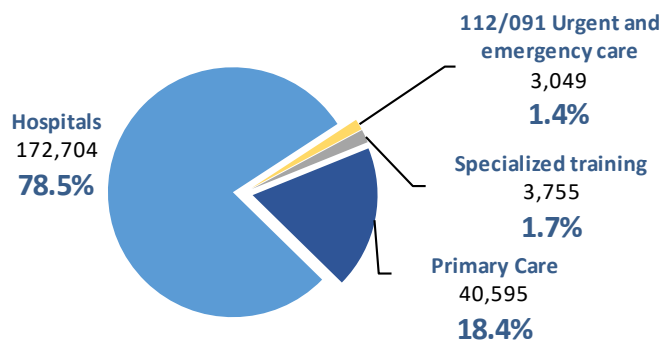
Spain is the 1st in practising doctors per 1,000 inhab. in the EU.



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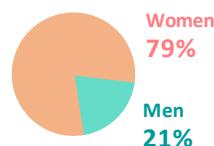
SNS NURSES

77.9% of SNS works at hospital, and 19.5% in primary care.

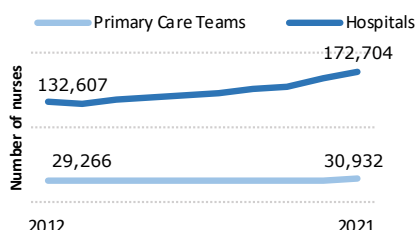
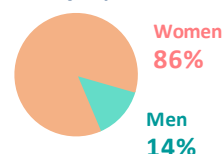


6.4 nurses / 1,000 people

Primary Care Teams:
0.8 / 1,000



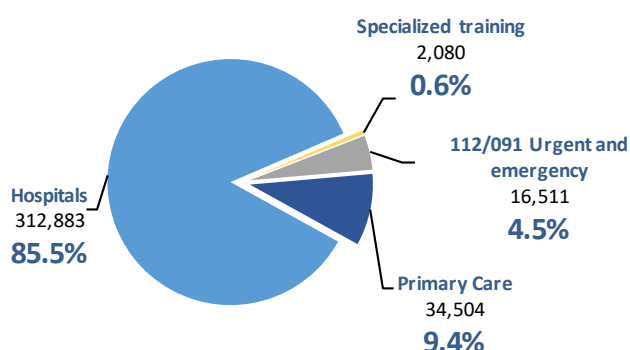
Hospitals:
3.7 / 1,000



↑ 30.2% (from 2.9 to 3.7 nurses per 1,000 people)

↑ 5.7% (0.7 nurses per 1,000 people throughout the period)

OTHER SNS PROFESSIONALS



The SNS has an additional 365,978 professionals^(*), in addition to doctors and nurses, and **85.5%** of these **work in hospitals** and **9.4%** in primary care.

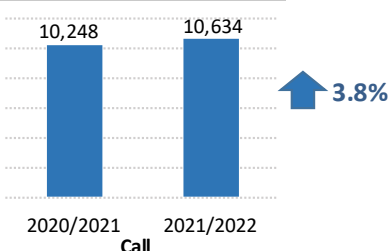
7.7 other professionals per 1,000 people

(*) Includes health and non-health professionals.

SPECIALIZED HEALTHCARE TRAINING

The number of places for Specialized Healthcare Training in the 2021/2022 call for applications **has increased by 3.8%** compared with the previous call.

Specialized Healthcare Training places



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HEALTHCARE EXPENDITURE

The **healthcare expenditure of the public administrations** accounts for **73.5%** of total healthcare expenditure.

Public healthcare

€90,317 millions

73.5%

92.2% corresponds to the **Autonomous Communities**, which dedicate **63.6%** to **hospital and specialized services**, **13.9%** to **primary care** and **15%** to **pharmacy**



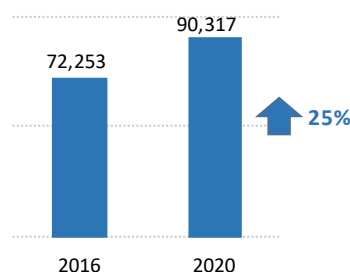
Private healthcare expenditure

€32,535 millions

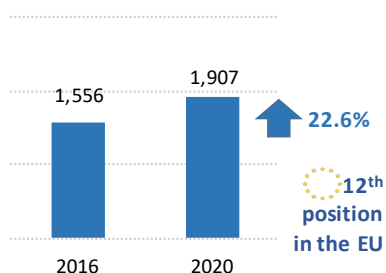
26.5%

72.5% of the private healthcare expenditure is borne through **direct payments by households** (co-payment for prescriptions and over-the-counter medicines, prostheses, orthoses and other medical products, outpatient care with a high weighting of dental care)

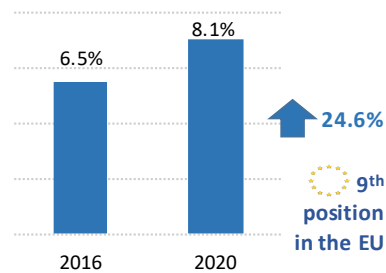
PUBLIC HEALTHCARE EXPENDITURE



Million euros

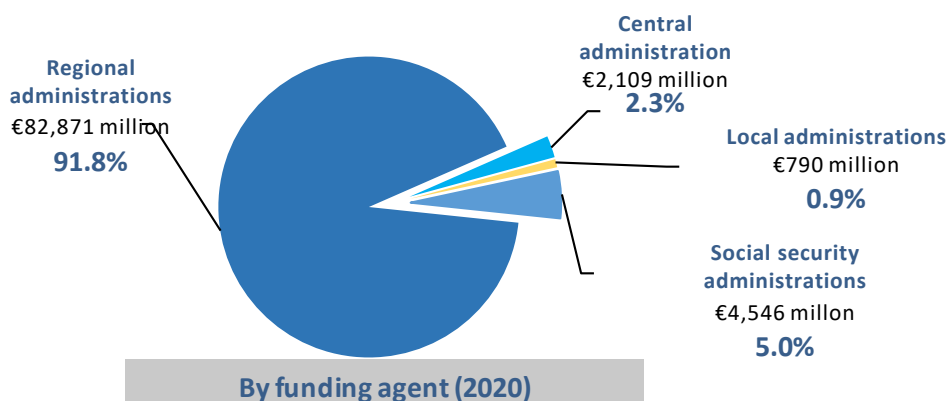


Euros per inhabitant



Percentage of GDP

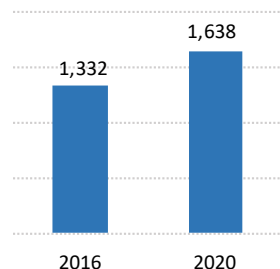
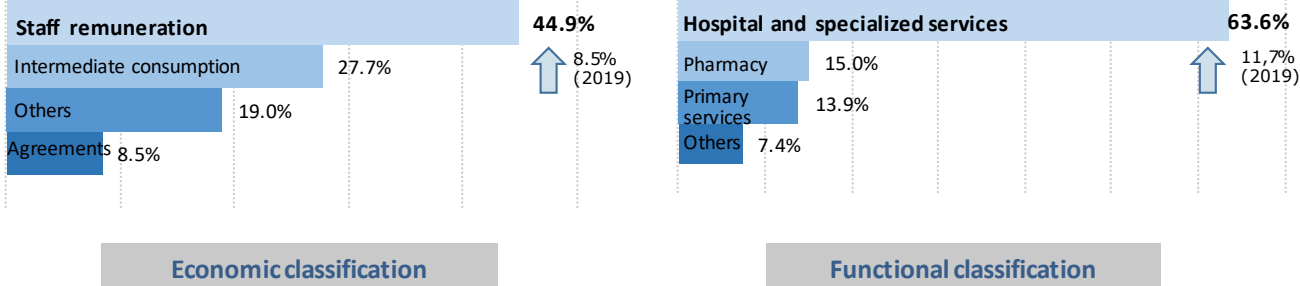
During the 2016-2020 period, **public healthcare expenditure increased by 25%** and **public healthcare expenditure per inhabitant, by 22.6%**. **Public healthcare expenditure as a percentage of GDP rose a 24.6%**.



By funding agent (2020)

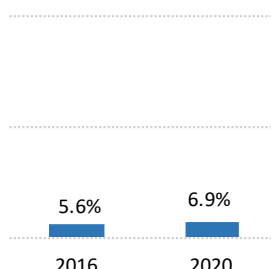
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EXPENDITURE ON PUBLIC HEALTHCARE MANAGED BY THE AUTONOMOUS COMMUNITIES



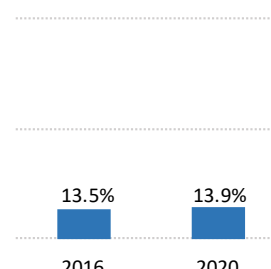
Euros per inhabitant

↑ 23%



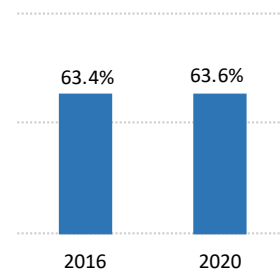
Percentage of GDP

↑ 23.2%



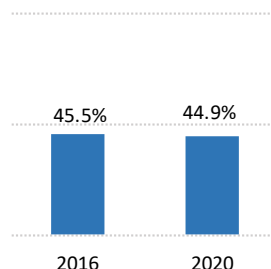
Percentage of expenditure on primary services

↑ 3%



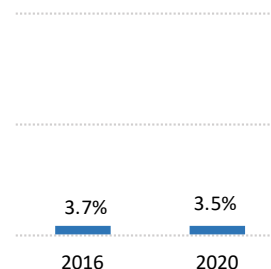
Percentage of expenditure on hospital and specialized services

↑ 0.3%



Percentage of expenditure on staff remuneration

↓ 1.3%

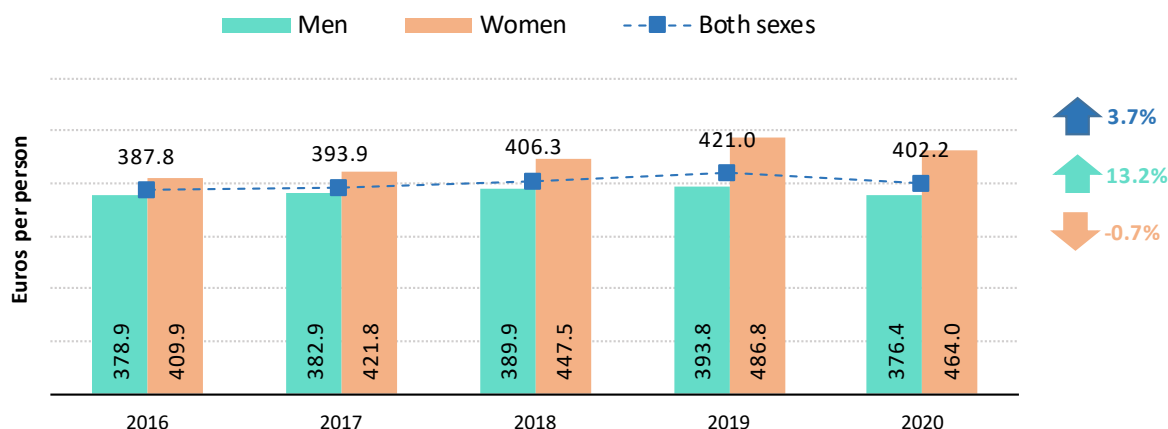


Percentage of expenditure on staff remuneration assigned to resident training

↓ 5.4%

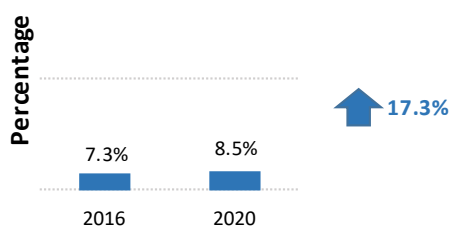
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AVERAGE ANNUAL EXPENSE PER PERSON ON HEALTHCARE GOODS AND SERVICES



By sex, **out-of-pocket expenditure** (co-payment for prescriptions and over-the-counter medicines, prostheses, orthoses and other medical products, outpatient care with a high weighting of dental care) has been higher for women throughout the five-year period, with the average expenditure being **16.0% greater for women than for men**.

POPULATION WITH HIGH HEALTH EXPENSES PER HOUSEHOLD (>10%)



The **expenditure per household on health in Spain** is a **6.3% higher** than the average expenditure of the EU.

PUBLIC HEALTH EXPENDITURE RELATED WITH COVID-19

Million euros

	2020
COVID-19 related treatment costs (including COVID-19 related costs for testing and contact tracing)	7,371
SARS-CoV-2 related costs for vaccination*	5
COVID-19 related costs for medical goods	10
Other COVID-19 related healthcare costs	545
COVID-19 related investment costs	982
Public health expenditure related to COVID-19	8,914



2nd position in the EU in **public health expenditure** related with **COVID-19**

*The vaccination campaign against COVID-19 began in Spain on December 27, 2020.



DIGITAL HEALTH

SNS DIGITAL HEALTH STRATEGY, 2021-2026

The **SNS Digital health strategy** approved by the Interterritorial Council of the SNS is the common framework for the development of **digital health transformation initiatives** in the public sector, by the competent **administrations in health matters and public bodies** linked to the field of **innovation and research in health**.

3 LINES OF ACTION

- 1 Development of **digital health services**
- 2 National and european **interoperability** of health
- 3 Boosting **data analytics** (primary and secondary uses)

Implementation linked to the funds associated with the “**Recovery assistance for cohesion and the territories of Europe (REACT-EU)**” and the “**Recovery and Resilience Facility**”.

Reference framework for other EU programmes : Horizon Europe, Digital Europe and Europe4Health.

4 OBJECTIVES



People and Health

Empowering and involving people in their healthcare and disease control



Value processes

Maximising the value of processes for better performance and efficiency of the public health system.



Innovation and 5P medicine

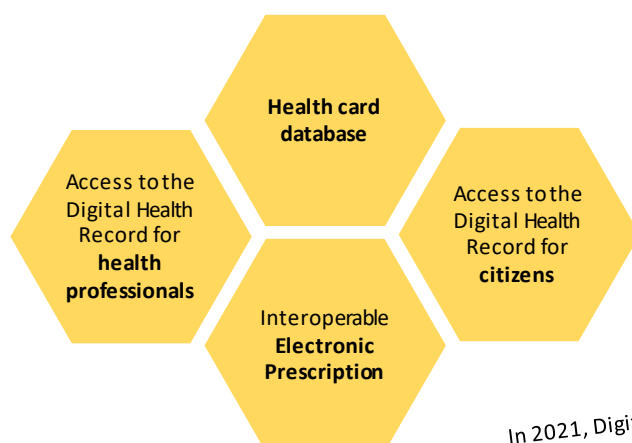
Adapting the progress of the health system to the demands of today's society



Interoperable and quality information

Data Space for the generation of scientific knowledge and for the evaluation of the services.

SNS INTEROPERABILITY SERVICES

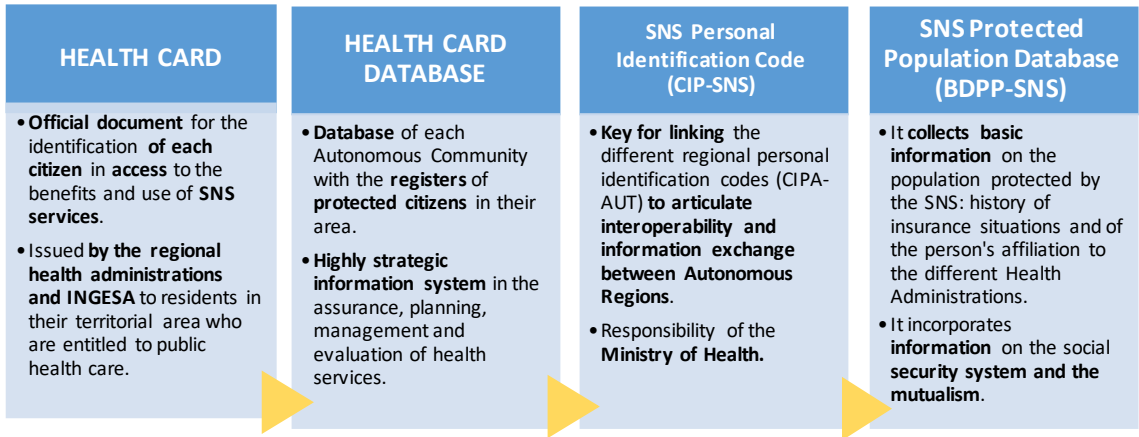


These lines of work of the **SNS** are based on the evolution of each of these systems in each **autonomous community**.

In 2021, Digital Health Record and Electronic Prescription services started interoperating with European countries.



SNS HEALTH CARD DATABASE



47,181,639 registered users in BDPP-SNS on 1st July 2022.

53,436 registered users in Title 58 Temporary Protection in BDPP-SNS on 1st July 2022, for assistance to people displaced by the war in Ukraine.

SNS DIGITAL HEALTH RECORD (HCDSNS)

It guarantees citizens and healthcare professionals access to the most relevant clinical documentation for the healthcare of each patient when travelling throughout the national territory.

2022

91% SNS covered population with references in HCDSNS
(42.4 million people)
2,952,948 citizen consultations
5,080,621 professionals consultations

	Type of Reports	Professional profile	Citizen profile
	SCH: Medical Summary Report	36,995	191,689
	PCCR: Primary Care Clinical Report	1,559	31,675
	ERR: Emergency Room Report	3,640	30,265
	HDR: Hospital Discharge Report	1,691	11,213
	OCCR: Outpatient Clinic Clinical Report	2,700	39,082
	LTRR: Laboratory Test Result Report	562	43,152
	MIR: Medical Imaging Report	411	14,221
	NCR: Nursing Care Report	61	2,040
	ODTRR: Other Diagnosis Test Result Report	97	1,731
	Total reports consulted in 2022	72,094	369,111
	Cumulative data on consultations and reports accessed (December 2018-December 2022)	18,811,283	24,275,353

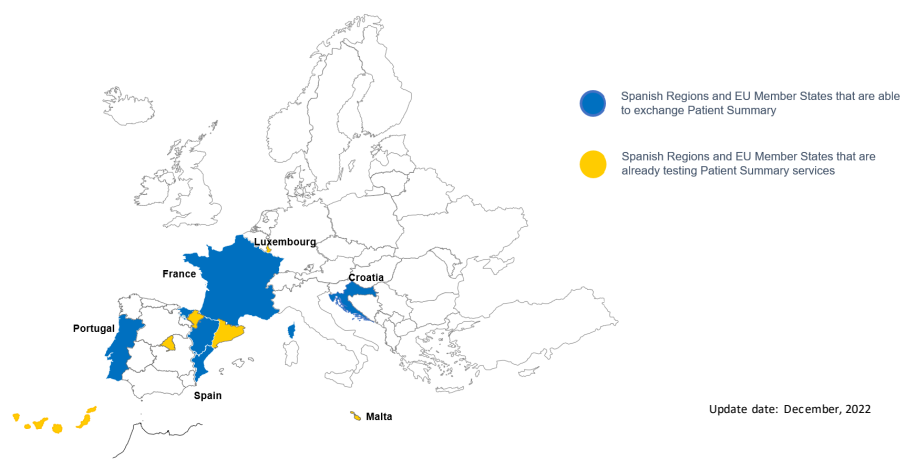
System active since 2018 in all autonomous communities, both for issuing and receiving clinical reports. Access through the website enabled by the Health Service where the Individual Health Card is active, by means of Digital Certificate, electronic ID or CI@ve.



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SNS DIGITAL HEALTH RECORD (HCDSNS)

Autonomous Communities that can communicate Patient Summary reports, and EU Member States with which it is possible to operate



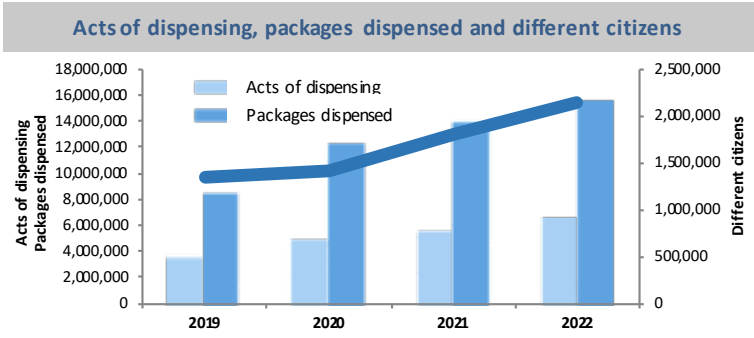
European cross-border healthcare services “My Health@EU”

Through the HCDSNS system, healthcare professionals in Croatia, France and Portugal (PS) can now consult the Patient Summary (PS) of Spanish citizens from the Autonomous Communities of Valencia, Basque Country and Aragon.

In addition, healthcare professionals in these autonomous communities will be able to access the Patient Summary of Croatian and Portuguese citizens visiting their healthcare centres.

SNS ELECTRONIC PRESCRIPTION (RESNS)

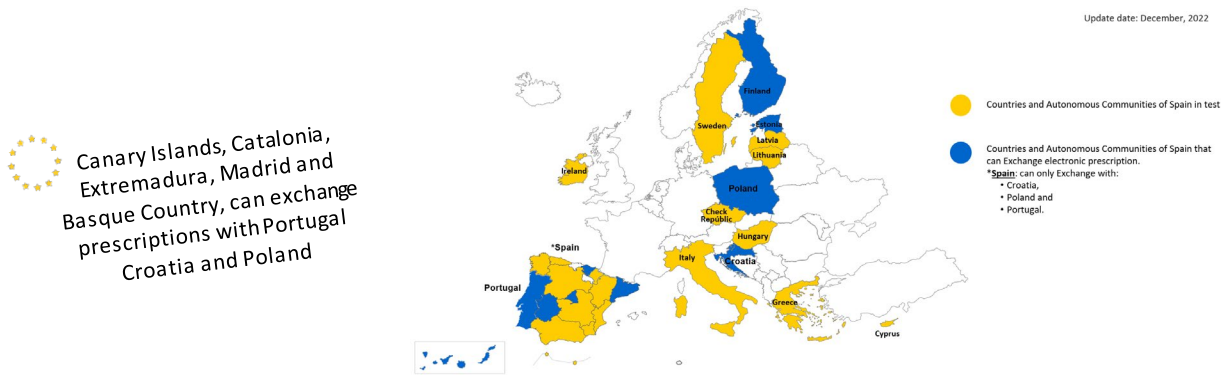
RESNS service allows medication prescribed in another autonomous community to be **dispensed** electronically from any pharmacy office. It is only necessary to present the **Health Card**.



In **2022**, **15.666.969 packages** have been dispensed to **2.137.728 different citizens**, in **6.510.302 acts of dispensing**.

4.63% of the population entitled to physical resources **has taken medicines in an autonomous community other than their community of origin**.

Autonomous Communities and EU Member States with which e-prescriptions can be exchanged



Canary Islands, Catalonia, Extremadura, Madrid and Basque Country, can exchange prescriptions with Portugal Croatia and Poland

The Annual report on the National Health System of Spain 2022 continues the series of reports begun in 2003 and offers synthetic and summarised information on the state of the National Health System and its evolution over time. Following the editorial line initiated in previous years, this new edition has a more graphic format to make the reading more agile and attractive.

Remarks: SNS = National Health System of Spain.